

Illinois Register

Rules of Governmental Agencies

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published by George H. Ryan Secretary of State



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INTRODUCTION

The Illinois Register is the official state document for publishing public notice of rulemaking activity by State governmental agencies. The table of contents is arranged categorically by rulemaking activity and alphabetically by agency within each category. Rulemaking activity consists of proposed or adopted new rules or amendments to or repealers of existing rules, including those by emergency or peremptory action.

The Register also contains Executive Orders and Proclamations issued by the Governor, notices of public information required by State statute, and activities (meeting agendas, Statements of Objection or Recommendation, etc.) of the Joint Committee on Administrative Rules (JCAR), a legislative oversight committee which monitors the rulemaking activities of State agencies. In addition, the Register contains a Cumulative Index listing alphabetically by agency the Parts (sets of rules) on which rulemaking activity has occurred in the current Register volume and a Sections Affected Index listing, by Title of the Illinois Administrative Code, each Section (including supplementary material) of a Part on which rulemaking activity has occurred in the current volume. Both indices are action coded and are designed to aid the public in monitoring rules.

The Register will serve as the update to the *Illinois Administrative Code*, a compilation of the rules of State agencies. The most recent edition of the *Code* along with the *Register* comprise the most current accounting of the State agencies' rules.

The *Illinois Register* is the property of the State of Illinois, granted by the authority of the Illinois Administrative Procedure Act (III. Rev. Stat. 1991, ch. 127, pars. 1001 et seq., as amended).

REGISTER PUBLICATION SCHEDULE 1992

Material Rec'd after 4:30 p.m. on:	And before 4:30 p.m. on:	Will be in Issue #:		Material Rec'd after 4:30 p.m. on	And before : 4:30 p.m. on:	Will be in issue #:	Published on:
Dec. 17, 1991	Dec. 24, 1991	1	Jan. 3, 1992	June 23, 1992	June 30, 1992	28	July 10, 1992
Dec. 24, 1991	Dec. 31, 1991	2	Jan. 10, 1992	June 30, 1992	July 7, 1992	29	July 17, 1992
Dec. 31, 1991	Jan. 7, 1992	3	Jan. 17, 1992	July 7, 1992	July 14, 1992	30	July 24, 1992
Jan. 7, 1992	Jan. 14, 1992	4	Jan. 24, 1992	July 14, 1992	July 21, 1992	31	July 31, 1992
Jan. 14, 1992	Jan. 21, 1992	5	Jan. 31, 1992	July 21, 1992	July 28, 1992	32	Aug. 7, 1992
Jan. 21, 1992	Jan. 28, 1992	6	Feb. 7, 1992	July 28, 1992	Aug. 4, 1992	33	Aug. 14, 1992
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Feb. 11, 1992	Feb. 18, 1992	9	Feb. 28, 1992	Aug. 18, 1992	Aug. 25, 1992	36	Sept. 4, 1992
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Mar. 3, 1992	Mar. 10, 1992	12	Mar. 20, 1992	Sept. 8, 1992	Sept. 15, 1992	3 9	Sept. 25, 1992
Mar. 10, 1992	Mar. 17, 1992	13	Mar. 27, 1992	Sept. 15, 1992	Sept. 22, 1992	40	Oct. 2, 1992
Mar. 17, 1992	Mar. 24, 1992	14	Apr. 3, 1992	Sept. 22, 1992	Sept. 29, 1992	41	Oct. 9, 1992
Mar. 24, 1992	Mar. 31, 1992	15	Apr. 10, 1992	Sept. 29, 1992	Oct. 6, 1992	42	Oct. 16, 1992
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Apr. 21, 1992	Apr. 28, 1992	19	May 8, 1992	Oct. 27, 1992	Nov. 2, 1992 (Mon)	46	Nov. 13, 1992
Apr. 28, 1992	May 5, 1992	20	May 15, 1992	Nov. 2, 1992 (Mon)	Nov. 10, 1992	47	Nov. 20, 1992
May 5, 1992	May 12, 1992	21	May 22, 1992	Nov. 10, 1992	Nov. 17, 1992	48	Nov. 30, 1992 (Mon.)
May 12, 1992	May 19, 1992	22	May 29, 1992	Nov. 17, 1992	Nov. 24, 1992	49	Dec. 4, 1992
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June 9, 1992	June 16, 1992	26	June 26, 1992	Dec. 15, 1992	Dec. 22, 1992	1	Jan. 4, 1993 (Mon)
June 16 1992	June 23, 1992	27	July 6, 1992 (Mon)	Dec. 22, 1992	Dec. 29, 1992	2	Jan. 8, 1993

Please note: When the Register deadline falls on a State holiday, the deadline becomes 4:30 p.m. on Monday (the day before).

NOTICE OF PROPOSED AMENDMENTS

Administrative Proceedings; Contested Cases; Petitions; Declaratory Rulings; Public Disclosure) Heading of Part: Administrative Rules (Formal

7

- 8 Ill. Adm. Code 1 Code Citation: 5
- Proposed Action: Amend Amend Amend Section Numbers: 3)
 - New Section New Section New Section Amend Amend Amend Amend Amend Amend 1.44 1.55 1.40 1.50
- New Section New Section New Section New Section New Section New Section Section New Section Amend Amend Amend Amend Amend New ..112 .120 .122 .118 1.80 1.85 1.65 1.75
 - New Section New Section Amend .128 .126
 - Amend Amend Amend Amend Amend 1.225 1.240 1.265 1.270 .280 .275
 - . 295 .285
- Repealed Amend Amend Amend Amend .305 .300
- Repealed Repealed Repealed Repealed

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NOTICE OF PROPOSED AMENDMENTS

Repealed	Amend	Amend	Amend										
1.335	1.340	1.345	1.350	1.400	1.410	1.415	1.420	2	1.435	1.445	1.500	Illustration A	Illustration B

- Statutory Authority: Illinois Administrative Procedure Act (III. Rev. Stat. 1989, ch. 127, pars. 1005-10, 1005-145, 1010-5, 1010-10, 1010-15, 1010-20, 1010-25, 1010-30, 1010-35, 1010-40, 1010-50, 1010-60, as amended by P.A. 87-823, effective July 1, 1992) 4
- A Complete Description of the Subjects and Issues Involved: administrative proceedings such as contested cases, as well as to petitions, declaratory rulings, and availability for public disclosure of Department files. This rulemaking amends rules which pertain to formal 2

In accordance with P.A. 87-823, the qualifications and authority of the Department's administrative law judges are established. The entire formal administrative proceeding process has been clarified. Conferences, discovery procedures, and a new section pertaining to decision and orders have been added. Those sections which pertain to reconsideration or stay of an administrative action have been added to the formal administrative proceedings Subpart. The rules on Declaratory Rulings have been deleted since the agency has never had any requests for such rulings.

- Will this proposed rule replace an emergency rule in effect?: No 9
- Does this rulemaking contain an automatic repeal_date? No 2
- Does this proposed amendment contain incorporations by reference? 8

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NOTICE OF PROPOSED AMENDMENTS

Repealed	Amend	Amend	Amend										
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c		345	S		1.410	1.415	1.420	425	1.430	1.445	1.500	Illustration	Illustration

Statutory Authority: Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989, ch. 127, pars. 1005-10, 1005-145, 1010-5, 1010-10, 1010-15, 1010-20, 1010-25, 1010-30, 1010-35, 1010-40, 1010-50, 1010-60, as amended by P.A. 87-823, effective July 1, 1992)

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A Complete Description of the Subjects and Issues Involved: 2

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- Does this rulemaking contain an automatic repeal date? No 7
- Does this proposed amendment contain incorporations by reference? 8

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NOTICE OF PROPOSED AMENDMENTS

- Are there any other amendments pending on this Part? 6
- Rule does not Statement of Statewide Policy Objectives: affect units of local governments. 10)
- A 45-day written comment period will be granted for receiving comments from the public. This comment period will begin on the day the notice of rulemaking appears in the Illinois Register. Comments should be sent to Judith Lozier, General Counsel, Department of Agriculture, State Fairgrounds, P.O. Box 19281, Springfield, Illinois 62794-Time, Place and Manner in which interested persons can comment on this proposed rulemaking: 11)

businesses. In accordance with Sections 3.01 and 4.03 of the Illinois Administrative Procedure Act, small businesses may present their comments to the Director as outlined above. The proposed rulemaking may have an impact on small

A) Date rule was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: May 22, 1992 Initial Regulatory Flexibility Analysis: 12)

is licensed or regulated by the Department of Agriculture or that could become involved in a formal administrative proceeding of the Department. Further, any business that wishes to make its views known may petition the Director in Types of small businesses affected: Any business that accordance with these rules.

C) Reporting, bookkeeping or other procedures required for compliance: Persons involved in a formal administrative proceeding must comply with time constraints, notice and administrative law procedures governing hearings, conferences, discovery procedures, and petitions for reconsideration or stay of administrative actions. Qualifications (experience, knowledge, skills, and ability) for appointment as an administrative law judge are set

Types of professional skills necessary for compliance: D) Types of professional SKILLS IN Basic management and recordkeeping The full text of the Proposed Amendments begins on the next page:

NOTICE OF PROPOSED AMENDMENTS

TITLE 8: AGRICULTURE AND ANIMALS
CHAPTER 1: DEPARTMENT OF AGRICULTURE
SUBCHAPTER a: GENERAL RULES

PART 1

ADMINISTRATIVE RULES (FORMAL ADMINISTRATIVE PROCEEDINGS; CONTESTED CASES; PETITIONS; BECLARATORY RULINGS; PUBLIC DISCLOSURE)

SUBPART A: DEFINITIONS

Section 1.10

Definitions

SUBPART B: FORMAL ADMINISTRATIVE PROCEEDINGS

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1.15	Nature of Formal Administrative Proceedings; Contested
	Cases; Licensing
1.20	Initiation of Formal Administrative Proceedings
1.22	Qualifications and Authority of the Department's
	Administrative Law Judges
1.25	Record of Formal Administrative Proceeding
1.30	Time Limit That Record of Proceeding Remains Open
1.35	Rules of Practice in Formal Administrative Hearings,
	Contested Cases and Licensing Proceedings (Repealed)
1.40	Formal Administrative Proceeding: Communications
1.42	Conferences
1.44	Discovery
1.45	Notice of Formal Administrative Proceeding, Time and Place
1.50	Formal Administrative Proceeding: Complainants
	Petitioners, and Respondents
1.55	Formal Administrative Proceeding: Appearances
	Representation by Attorney
1.60	Initiation of Complaints: Formal Complaints and Petitions
	and-Informal
1.65	Motions
1.70	Documents Filed in a Formal Administrative Proceeding:
	Format
1.75	Procedures for Conducting Administrative Hearing: Rules of
	Evidence, Corrections to Transcript of Record, Appointment
	of Hearing Examiner
1.77	Decision and Order
1.80	Subpoenas
1.85	Witnesses
1.90	Continuances of Proceeding
1.95	Submitting Petition for Reconsideration or Stay of

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SUBPART C: PETITIONS	no	Petitions: Format		Petitions: Filing with Director		Petitions: Denial	Petitions: Written Comments on Petition Filed with Director	Petitions: Amending, Supplementing or Withdrawing	Petitions:	Petitions: Considered Submitted							Public Hearing on Petition: Procedure for Conducting the	Hearing		Person Representing Organization, Association or Another	Person	Alternative Proposals	Decision Based Upon Record	Decision on Petition: Time Limit
	Section	1.200	1.205	1.210	1.215	1.220	1.225	1.230	1.235	1.240	1.245	1.250	1.255	1.260	1.265	1.270	1.275		1.280	1.285		1.290	1.295	1.300

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Petition for Reconsideration or Stay of Administrative Action: Initiated by Department or Departmental Advisory Board (Repealed) Petition for Reconsideration or Stay of Administrative Action: Initiated by Interested Person; Time Limit (Repealed) Petition for Reconsideration: Format and Content (Repealed)	1.315
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Petition for Reconsideration: Format and Content (Repealed	320
(Repealed)	
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recitationer a vidina to a riivare meeting	200

1.330	1.330 Petition for Reconsideration: Based Upon Administrative
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	Action: Signing Petition, Legality, Date Considered
	Submitted, Computing Time Limits, and Receipt for Such
	Document (Repealed)

Content (Repealed)

1.335 Petition for Reconsideration or Stay of Administrative	Date Considered	Submitted, Computing Time Limits, and Receipt for Such	Document (Repealed)	Administration
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Administrative	Action: Director's Decision; Time Limit (Repealed)	Petition for Reconsideration: Criteria for Granting		Petition for Stay or Delay of Administrative Action:
Stay of	Limit (F	Criteria		Adminis
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side	Deci	isuc		or
Recon	tor's	Rec	ealed)	Stay
for	irec	for	(Rep	for
Petition	Action: D	Petition	Petition (Repealed)	Petition
1.340		1.345		1.350

DECLARATORY RULINGS SUBPART D:

Criteria for Granting Petition (Repealed)

	Decraratory Autrigs: Advisory Opinion Inspeared. Request for An Advisory Opinion (Repealed)	Request for An Advisory Opinion; Format and Content, Date	Considered Received, and Receipt (Repealed)	Agency's Response; Time Limit (Repealed)		(Repealed)	Formal Position of The Department (Repealed)	Amending or Revoking an Advisory Opinion (Repealed)	Use of Advisory Opinion in Administrative Proceedings
Section	1.400	1.410		1.415	1.420		1.425	1.430	1.435

	An Advisory Opinion;	d)	nformal Communication
	Action Taken In Conformity with An Advisory Opinion;	Acceptability By Department (Repealed)	ployee of Department; In
(Repealed)	1.440 Action Taken	Acceptability	1.445 Advice by Em

(Repealed)

SUBPART E: AVAILABILITY FOR PUBLIC DISCLOSURE OF DEPARTMENT OF AGRICULTURE FILES

Section

1.500 Availability of Information Contained in Department Records for Inspection and/or Copying; Procedure to be Followed
1.500

1.505 Request for Access to Confidential File (Repealed) ILLUSTRATION A Petition

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Petition For Reconsideration Д ILLUSTRATION

AUTHORITY: Implementing and authorized by Sections 5-10, 5-145, 10-5, 10-10, 10-15, 10-20, 10-25, 10-30, 10-35, 10-40, 10-50, and 10-60 4, 8 and 9 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989 1987, ch. 127, pars. 1005-10, 1005-145, 1010-5, 1010-10, 1010-15, 1010-20, 1010-25, 1010-30, 1010-35, 1010-40, 1010-50, and 1010-60, as amended by P.A. 87-823, effective July 1, 1992] 1004, 1008 and 1009 and The Freedom of Information Act (Ill. Rev. Stat. 1989 1987, ch. 116, par. 201 et seq.).

SOURCE: Rules and Regulations Relating to The Administrative Procedure Act, filed December 30, 1977, effective January 15, 1978; 3 Ill. Reg. 48, p. 160, effective November 20, 1979; codified at 5 Ill. Reg. 10429; amended at 6 Ill. Reg. 14981, effective November 24, 1982; amended at 9 Ill. Reg. 1313, effective January 23, 1985; amended at 12 Ill. Reg. 11439, effective June 22, 1988; , effective amended at 16 Ill. Reg.

SUBPART A: DEFINITIONS

Section 1.10 Definitions

(III. Rev. Stat. 1989, ch. 127, pars. 1001-10 through 1001-85, as amended by P.A. 87-823, effective July 1, 1992), As used in these rules the following terms shall have the In addition to the definitions set forth in Sections 1-10 through 1-85 of the Illinois Administrative Procedure Act meanings specified: a)

"Administrative action" includes every form and kind of act, including the refusal or failure to act, involved in the implementation of the laws administered by the Department of Agriculture. "Administrative file" means a file maintained by the Illinois Department of Agriculture in which alt documents pertaining to an administrative proceeding or action, including internal working memoranda and recommendations, are retained.

issue, amend, or revoke a regulation or order or to take or refrain from taking any other form of administrative action. A public hearing conducted by or before a departmental advisory board or a statutorily established advisory board will be considered an administrative proceeding of the t t 'Administrative proceeding" means any undertaking Department

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"Department" or "Department of Agriculture" means the Department of Agriculture of the State of Illinois.

similar group, or any subcommittee subcommitee or other subgroup sub-group thereof that is not composed wholly "Department advisory board" or "department advisory committee" . means any committee, board, commission, panel, task force, or other full-time officers or employees of the Illinois and is established or utilized by the Department of Agriculture to obtain Department of Agriculture advice or recommendations. council, conference,

Illinois the οf the Director Department of Agriculture. means "Director"

Administretestive Services or the Division of Plant Industry and Consumer Sorvices or the Division of Marketing or the Division of Animal Industries or the Division of Fairs and Horse Racing or the Division of Natural Resources. 9 the Bivision "Division" means

duties or privileges of a party are required by adjudicatory administrative procedure conducted by the Department in accordance with the authority of a <u>law</u> specific enabling act administered by the Department, and/or the Illinois Administrative Procedure Act_ and law to be determined by an agency and which places specific requirements (such as, time deadlines and, Subpart B of this Part in which the individual legal eter) proceeding" record, Department and/or on an individual. administrative administrative οţ "Formal rights, content

means all the statutory provisions with respect to which authority has been delegated to the Illinois Department of Agriculture. Laws administered by the "Laws administered by the Department of Agriculture" Department of Agriculture are listed in 2 Ill. Adm. "Meeting" means any oral discussion between two or more persons. "Order" means any final agency disposition, other than in a preceding - SAMINIBERALIVE jurisdiction of the Department of Agriculturor issuanse of a regulation, in concerning

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"Petition" means any petition or other document requesting the Director to establish, amend or revoke a regulation or order or to take or refrain from taking a petition. In order for any other document to be accepted as a petition, it must contain language action. Requests, suggestions and recommendations made informally in routine correspondence received by the any other form of administrative action under the laws Illustration A sets forth the form and information for stating it is a petition and information necessary for the Department to make a determination on the requested Illinois Department of Agriculture do not constitute a Agriculture. of by the Department administered petition.

"Roqulation" or "Rule"-means any agency regulation of rete-sf-general or particular applicability and future A listing of rules premulgated by the Department and the rulewaking offect implementing or applying any law administered by -Department of Agriculture or relating procedure can be found in 2 111. Adm. Code 700. administrative-practices-and-procedures.

council, panel, conference, task force, or other similar group, or any subcommittee or other subgroup thereof, that is statutorily established and whose advisory board" or "statutory advisory committee" means any committee, board, commission, powers and duties or purposes are statutorily set. "Statutory

Consumer Services or the Superintendent of the Division Animal Industries or the Superintendent of the Division of Fairs and Horse Racing or the Superintendent of the Superintendent of the Superintundent of the Division of Plant Industry and of Warketing or the Superintendent of the Bivision of Division of Matural Resources of the Department Services Administrative-"Superintendent" means the 40 Agriculture, Division

Words in the singular form shall be deemed to include the plural, words in the masculine form shall be deemed to include the feminine form, and vice versa, as the case may require (q

effective Reg. 16 Ill. at Amended (Source:

FORMAL ADMINISTRATIVE PROCEEDINGS SUBPART B:

NOTICE OF PROPOSED AMENDMENTS

to 1 1 Material of Talental Manifester December December 1

Section 1.15 Nature of Formal Administrative Proceedings; Contested Cases; Licensing

8 Ill. Adm. Code 1: <u>Subpart B</u> governs practices and procedures applicable to formal administrative proceedings conducted by the Department of Agriculture in hearing contested cases under the laws administered by the Department. "Where the Act creating or conferring power on an agency establishes administrative procedures not covered by this Act, such procedures shall remain in effect" (quoted from Section 1—5 a of the cillinois Administrative Procedure Act (ill. Rev. Stat. 1989 1981, ch. 127, par. 1001—5, as amended by P.A. 87–823, effective July 1, 1992 1404). Procedures governing contested cases or licensing shall be those established by the Illinois Administrative Procedure Act and in Subpart B of this Part; "If however, if an agency has existing procedures on July 1, 1977, specifically for contested cases or licensing, those existing provisions control" (quoted from Section 1—5 2 of the Illinois Administrative Procedure Act).

(Source: Amended at 16 Ill. Reg. _____, effective

Section 1.20 Initiation of Formal Administrative Proceedings

- a) A formal administrative proceeding to hear contested cases under the laws administered by the Department of Agriculture shall may be initiated by the Department in accordance with Section 1.60, in any of the following ways:
- a) Any person may petition the Director to issue, amend or revoke a rule or regulation or order or to take or refrain from taking any other form of administrative action.
- b) The Director or his duly authorized agent may on his own initiative institute a proceeding to issue, amend or revoke a rule or regulation or order or to take or refrain from taking any other form of administrative action.
- e)—A departmental advisory board or committee or a statutorily established advisory board or committee may request the Birector to issue, amend or revoke a rule or regulation or order or to take or refrain from taking any other form of administrative action.
- b) The Director of the Department shall designate an administrative law judge.
- c) The respondent may file an affidavit setting forth specific allegations of personal bias, prejudice or disqualification

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of a presiding administrative law judge. Such affidavit shall be filed, if at all, prior to the start of a contested case hearing.

- d) The Director, on his or her own motion or upon petition of the respondent, shall disqualify the administrative law judge when the Director finds the administrative law judge has direct involvement in the case.
- e) An administrative law judge may, at any time, voluntarily disqualify himself or herself.
- Mhen an administrative law judge is disqualified, the Director shall appoint another administrative law judge.

(Source: Amended at 16 Ill. Reg. , effective

Section 1.22 Qualifications and Authority of the Department's Administrative Law Judges

- a) Appointment and qualifications of the administrative law judges: In accordance with Section 10-20 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989, ch. 127, par. 1010-20, as amended by P.A. 87-823, effective July 1, 1992), the following persons are authorized to act as administrative law judges:
- 1) the Director;
- 2) the Director may appoint an attorney licensed to practice law in Illinois; or
- 1) the Director may appoint a person as an administrative law indoe who is not licensed to practice law in Illinois, provided such person meets the following minimum qualifications:
- A) The person has at least two years of experience in administrative law.
- B) The person has knowledge of evidentiary procedures and of the procedures for formal administrative proceedings.
- C) The person has knowledge of the laws, rules and regulations applicable to the Department.
- D) The person has the ability to prepare complex and

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technical legal documents.

- and appraise facts, evidence, legal and administrative documents, records, and audits in order to obtain a clear mental picture of the The person has the ability and skill to analyze evidence, issues involved. 듸
- action to avoid delay, to maintain order, and to ensure development of a clear and complete record. The administrative law judge shall have all powers necessary to these ends, including but not limited to the power to: The administrative law judge shall have the authority to Authority of the Department's administrative law judge: conduct a contested case hearing, to take all necessary 回
- rule upon offers of proof and receive evidence and rule upon objections to the introduction of evidence; 7
- requlate the course of the hearings and conduct of the parties and their counsel therein; 2
- testimony and the production of books, papers and other documentary evidence necessary for resolution of the subpoenas that require attendance, the giving and depositions, take examine witnesses, (ر)
- make findings of fact and conclusions of law and issue an order of the Department; and 4
- direct parties to appear and confer for the settlement or simplification of the issues, or any other purpose pertinent to the formal administrative proceeding. 3

effective Reg. 111. 16 at Added (Source:

Section 1.25 Record of Formal Administrative Proceeding

a formal administrative proceeding shall include consist of the following: The record of

- Any petition that has been filed with the Director and 14 and all submitted petition, information on which it relies pertains a)
- All pleadings (including all notices and responses All written comments thereto), motions and rulings. q

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received on the petition or on the Department's proposal shall include all data or information submitted

- proceeding concerned a proposal to issue, amond or revoke a rule or regulation, a copy of the current regulation and the proposed change or the new rule or requlation. of matters officially noticed. statement Û
- discovery documentation, if any, and evidence received, if any, meeting and any documents introduced as evidence. the hearing, of transcript The g
- The memorandum of the administrative law judge that states the action taken at conference(s), if held, and notes of ex Parte communication, if any, in accordance with Section 10-60 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989, ch. 127, par. 1010-60, as amended by P.A. 87 823, effective July 1, 1992). 히
- The Director's or <u>administrative law judge's</u> hearing examiner's decision or <u>order</u> on such petition, proposal or administrative action. ŧe)

effective Reg. 16 Ill. at Amended (Source:

Communications Formal Administrative Proceeding: Section 1.40

- Director or administrative law judge hearing examiner, State Fairgrounds, P.O. Box 19281, Springfield, Illinois 62794-9281 62706, unless otherwise instructed. to the concerning addressed All communications to the Department shall be administrative proceedings a
- personally or shall be served by registered or certified mail on the respondent or his or her authorized agent. affidavit of the person making personal service, or by the A copy of the formal complaint shall either be served Proof of service of the complaint shall be made by registered or certified mail receipt. q
- notices, after issuance of the complaint, shall be served personally or by First Class United States Mail, and copies Any pleadings, motions, orders, and conference or discovery thereof shall be filed with the administrative law judge. 히

effective Ill. Reg. 16 at Amended (Source:

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Conferences Section 1.42

- its administrative law judge at any time prior to or during The administrative law judge shall direct the parties or their attorneys to appear at a specific time and place for a conference when it appears verbally or in writing a conference with the Department and The respondent or the respondent's attorney may_request that one or more of the following may be accomplished: the course of a hearing. a
- the simplification of issues; 1
- for the purposes of clarification, amplification or the necessity or desirability of amending the pleadings limitation; 7
- the possibility of making admissions of certain facts or stipulations concerning the use of either or both record to avoid public parties of matters of public unnecessary introduction of proof; 3
- the limitation of the number of witnesses; 4)
- the propriety of prior mutual exchange between or among the parties of prepared testimony and exhibits; and 2)
- such other matters as may aid in the simplification of the evidence and disposition of the proceeding. 9
- memorandum prepared and certified by the administrative law Action taken at a conference shall be recorded judge. q

effective Reg. 111. 16 at Added (Source:

Section 1.44 Discovery

- procedures shall be ordered by the administrative law judge prepare for the hearing, or to avoid surprise at the Upon written request of any party, the following discovery clear or concise record, to ensure a fair opportunity to where necessary to expedite the proceedings, to ensure nearing: a a
- production or inspection of documents, books, and records pertinent to the case; 7
- depositions; 5

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- interrogatories.
- The administrative law judge shall restrict such discovery where necessary to prevent undue delay or harassment. a
- list of persons who may upon written have knowledge of facts concerning the subjects of inquiry The administrative law judge shall order, request of any affected party, a at the hearing. <u></u>
- or required to submit documents under this Section may be Any person, including a party, who is deposed, interrogated relevant to the subject matter of the formal administrative or which may lead to the discovery of such examined regarding any matter, not privileged, which relevant information. proceeding, q
- application to the administrative law judge, either before or after the taking of such deposition or interrogation and All depositions and interrogatories may be used as the Upon upon a showing that at the time of the hearing, the party participate in the hearing because of death, age, sickness, infirmity, absence from the country or other exceptional circumstances, the administrative law judge shall order that the deposition or interrogatories be used as evidence deposed or interrogated will not be available admission of the deposed or interrogated party. in the hearing. 히

effective Ill. Reg. 16 a t Added (Source:

Notice of Formal Administrative Proceeding: Time and Section 1.45 Place

- The Director or the administrative law judge duly appointed hearing examiner shall set the date, specify the time, and place of all formal administrative proceedings. a
- offices of the Department in Springfield, Illinois, or in such other place as the Director or administrative law ludge shall for stated cause designate (0.9., respondent The formal administrative proceeding shall be held in the unable to travel because of age or infirmity). a
- the formal administrative proceeding is scheduled, unless the specific statute or rules under which the alleged The Department shall give written notice to affected parties not later than 10 days prior to the date on which ១

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violation occurred state otherwise

not be used as a defense to an enforcement action, but any person adversely affected by such failure of compliance may Failure to comply with the provisions of this Subpart may t C hearing postponed upon motion administrative law judge. 히

effective 16 Ill. Reg. Amended at (Source:

Complainants Formal Administrative Proceeding: Petitioners, and Respondents Section 1.50

- designated the complainant. Any adverse party shall be designated as the respondent. The parties to proceedings respondents. The Department shall be deemed a complainant petition is filed or to whom a Formal Complaint is the Department shall -complaint before the Department are the complainants and in any proceedings initiated on its own motion. respondents are parties against whom a initiating a complaint, directed, a
- Any person who has been affected by an adverse decision of the petitioner, and the Department may file a petition with the Director. Department shall be designated the respondent. designated þe shall a
- but the for dismissal, name of any party may be corrected at any time Misnomer of a party is not grounds 히

effective Reg. 111. 16 at Amended (Source:

Appearances Formal Administrative Proceeding: Representation by Attorney Section 1.55

follows: party to the proceeding may appear and be by an attorney at law authorized to practice association shall appear and be represented by an attorney represent others in proceedings before this Department. Any person may appear in a formal administrative proceeding in the State of Illinois. A natural person may appear and A corporation of at law shall NAL persons appearing in proceedings before the tenant persons admitted by the Supreme Court of this State authorized to practice in the State of Illinois. as attorneys and counsellers be heard on his or her own behalf. represented practice a)

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abusive manner, the hearing examiner will warn the person to cease such abuse. If the person continues such action, person uses abusive language or conducts himself in an shall conduct themselves in a respectful manner he will be removed from the proceeding.

- jurisdiction in the United States or foreign country, who is admitted to practice in that jurisdiction, may participate in a formal administrative proceeding. A natural person may appear in his or her own behalf or be represented by an attorney at law who is licensed practice law in the State of Illinois, or both. A any from law counselor or attorney 4
- representative, or may be represented by an attorney licensed to practice law in the State of Illinois or both. Any attorney or counselor at law from any other jurisdiction in the United States or foreign country, who is admitted to practice in that jurisdiction, may A business, nonprofit or government organization may participate in a formal administrative proceeding. any bonafide officer, 2
- file a written notice of appearance with the Department, together with proof of service on all parties or their attorney appearing in a representative capacity shall respective attorneys.
- Department, either in person or by counsel, shall inform the Department in writing or upon the record of the address at which any notice or other document may be served upon who appears before proceeding him or her in such proceeding. to a party CP)
- All persons appearing in a formal administrative proceeding conducts himself or herself in an abusive manner, the administrative law judge shall warn the person to cease Removal of respectful manner. If any person uses abusive language or If the person continues such action, such before the Department shall conduct themselves in from the proceedings shall not be grounds person shall be removed from the proceedings. dismissal of the case. such abuse such party 히

effective 16 Ill. Req. at Amended Initiation of Complaints: Formal Complaints and Petitions and Informat Section 1.60

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shall be in the form of a formal complaint may be formal or Department, and they the be initiated by Complaints may intormat.

a)

- on the nature of the complaint. The presentation of an Such complaints will not be docketed, will not initiate a proceeding, and will not arrest the running of any limitation period. Matters informally duly authorized person, by correspondence or conference with the person or corporation or other legal entity The method the Director uses to respond to the complaint will depend informal complaint shall be without prejudice to the "Informal complaints" may be instituted in writing or presented will be taken up by the Director or other complained of in an endeavor to bring about right to file a formal "Notice to Show Cause," correction of the alleged violation. *erbally. 4
- A formal complaint shall: "Formal Complaint" shall also be known as a "Notice to Show Cause," 15)
- be addressed to the person <u>alleged to be in</u> violation of the statute or rules directed to show The Formal Complaint shall be in writing and shall cause or complained against. Ā
- notice and The Formal Complaint shall serve as shall contain the following include: B)
- and time, place date, nature of the hearing; of the a statement 1
- a statement of the legal authority and jurisdiction under which the hearing is to be neld and the official file number; ď 11)
- statement if otherwise provided for by law, a short and plain statement of the matters involved, and, except for a more detailed a reference to the particular section(s) of respondent is alleged to be in violation; of which the statute(s) and rule(s) seeerted. 111)
- a statement of when and where the alleged violation(s) occurred; 7
- a short and plain statement of facts that the alleged violation(s) occurred; 긔

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- possible consequences that the complainant seeks if the allegations in the complaint are proven; a]] indicating statement 굯
- the names and addresses of the administrative other persons to whom the Department gives notice of the contested case hearing. parties, affected vii)
- as prescribed in the specific enabling Act <u>or as set forth in Section 1.40. If the specifie</u> an officer thereof. The Formal Complaint shall be served at least ten (10) days before any hearing, enabling statute does not so provide, then the Formal Complaint shall be served personally, or by The Formal Complaint shall be served in the manner In the case of a corporation or other legal entity, the complaint shall be served upon unless a statute specifically provides otherwise. Complaint shall be served upon the parties their agents appointed to receive service certified or registered mail. Process. ົວ
- The an explicit admission or denial of each allegation of the pleading to which they relate and a concise statement of the nature of the defense. If a solution answer must be filled, if at all, at least 48 hours prior to the date of hearing. The answer shall contain A respondent may file with the Department a written or timetable for compliance is mutually agreed to, the Department shall immediately notify the respondent of formal complaint Formal Complaint. the cancellation of the hearing. answer to a 23)
- Relevant amendments to pleadings shall be allowed upon proper motion at any time during the pendency of the proceeding. 34)
- All <u>formal complaints</u> Formal Complaints, answers or other pleadings shall be liberally construed with a view toward doing substantial justice between the parties. 45)
- adverse decision of the Department outside the Department. verbally. Such complaints will not be decketed, will not Complaints may be initiated by persons affected by an <u>Informal complaints—may be instituted in writing—or</u> initiate a formal proceeding, and will not arrest the <u>a</u>

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running of any limitation period. Matters informally presented will be taken up by the Director or other duly authorized person by correspondence or conference with the person complained of in an endeavor to bring about a correction of the alleged violation. The method the Director uses to respond to the complaint will depend on the nature of the complaint. A person who is affected by an adverse decision of the Department may also initiate a complaint through the petition process in accordance with the provisions of Subpart C of this Part. The form and content of the Detaillo be in accordance with Illustration A of the rules of this Part.

(Source: Amended at 16 Ill. Reg. ____, effective

Section 1.65 Motions

- a) Motions may be presented requesting a postponement of the hearing; a more sufficient pleading; a bill of particulars; the striking of irrelevant or immaterial matter; the dismissal of the proceedings for want of jurisdiction; the quashing of a subpoena; the postponement of an effective date of an order; the extension of time for compliance with an order; or such other relief or order as may be appropriate.
- b) Motions, unless made <u>orally</u> during a hearing, shall be made in writing at least 5 days prior to the date of the hearing or on such other date as the administrative law judge shall designate, shall set forth the relief or order sought, and shall be ruled upon on the day of such hearing, or prior to such hearing after notice to all parties and opportunity to be heard on such motion. The requirement of writing is fulfilled if the motion is stated in a written Notlee of the Motion. Motions based on matter which does not appear of record shall be supported by affidavit.
- c) Motions made orally during the hearing shall be ruled on immediately by the administrative law judge or taken under advisement and ruled upon at a later date.

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Section 1.75 Procedures for Conducting Administrative Hearing: Rules of Evidence,—Corrections—to—Transcript of Record, Appointment of Hearing Examines

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- a) All hearings conducted in any proceeding preseedings shall be open to the public. Pursuant to authority of a Department the licensing Act or the rules thereof, which are listed in 2 Ill. Adm. Code 700, the Department shall hold ew-parte hearings immediately when there is imminent danger to the public health, safety or welfare.
- D) The Director or an administrative law judge a hearing examiner appointed by the Director shall conduct hearings in accordance with the authority set forth in Section 1.22, administer eather jesue cubpense; take depositions or cause the same to be taken, requiste the course of hearings, hold informal conferences for the course of hearings, hold informal conferences for the course of hearings, hold informal conferences for the cettlement simplification, or definition of issues; dispose of procedural requests, motions, and cimilar matters; continue the hearing from time to time when necessary, examine witnesses; and rule upon the admissibility of evidence and amendments to pleadings. Continuances and extensions of time shall be granted in accordance with the provisions of 8 Ill. Adm. Code 1.90.
- c) The Director or the administrative law judge hearing examiner shall direct all parties to enter their appearances on the record.
- d) The following shall be the order of all contested case hearings, subject to modification by the administrative law judge for good cause (e.g., bad weather):
- 1) Presentation, argument and disposition of motions preliminary to a hearing on the merits of the matters raised in the complaint;
- 2) Presentation of opening statements;
- 3) Complainant's or petitioner's case in chief;
- 4) Respondent's case in chief;
- 5) Complainant's or petitioner's case in rebuttal;
- 6) Respondent's closing argument;
- 7) Complainant's or petitioner's closing argument;
- 8) Presentation and argument of all motions prior to final order.

At all hearings the complainant shall open and close.

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- Parties may by stipulation agree upon any facts involved in the proceeding. The facts stipulated shall be considered as evidence in the proceeding. Unless precluded by law, Failure of a party to appear on the date set for hearing or failure to proceed as ordered by the Department shall consent order or default. case by any contested of stipulation, agreed settlement, may be made constitute a default. disposition е е
- At any stage of the hearing or after all parties have completed the presentation of their evidence, the At any stage of the company of their evidence, the Completed the presentation of their evidence, the Department or its administrative law judge hearing examines may call upon any party or the technical staff of the Department of Agriculture or other Departments of State Government or on the University of Illinois for further evidence or material when necessary for the disposition of the case. £)
- administrative law judge hearing examiner and also in formulating the findings of fact and conclusions of law (if any) which support the decision. A copy of the whole or any part of an admissible book, record, paper or memorandum the material or relevant portions thereof, if otherwise admissible, may be read into the record or a true copy embraced in a book, paper or document containing other matter not material or relevant, the party offering the same shall plainly designate the matter so offered. If, in the judgment of the Director or administrative law judge unnecessarily encumber the record, such book, paper or document will not be received in evidence as a whole, but the Circuit Courts of this State shall be However, evidence not admissible under such rules of evidence may be admitted (except where precluded by statute) if it is of a type commonly relied upon by Immaterial, irrelevant or unduly repetitious material shall be excluded. All admissible evidence shall be considered of the Department which is made by photostatic or other method of accurate and permanent reproduction may be admitted in evidence at the hearing without further proof of the accuracy of such copy. When any material or hearing officer, such immaterial or irrelevant matter would reasonably prudent persons in the conduct of their affairs. The rules of evidence and privilege as applied in civil of the accuracy of such copy. When any material relevant matter offered in evidence by any party in accordance with its relative probative value formulating the final decision of the Director thereof supplied in the form of an exhibit. cases in followed. 6
- Rules of evidence, official notice of matters of which h H

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official notice of generally recognized technical or scientific facts within the agency's specialized knowledge Circuit Courts of this State may take judicial notice, and shall be in accordance with Section 10-40 12 of the Illinois Administrative Procedure Procedures Act (Ill. Rev. Stat. 1989, ch. 127, par. 1010-40, as amended by P.A. 87-823, effective July 1, 1992).

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record the proceedings make and transcribe a stenographic record of the hearings in all proceedings, and no other tape or video camera recordings of the hearings by the payment to him or her of appropriate charges. Any party may request a copy of the transcript from the official reporter, and such party shall be responsible for all costs respondent or the public shall be permitted will provide <u>for such copics of the transcript as it may require for its</u> The Department's record of the proceedings No copies of the transcript will be furnished to parties by the Department, but copics may be obtained from the official reporter upon The Department shall designate an official reporter to official transcript. associated with the transcription. be the own purposes. shall

1

- direct the corrections to be made and the manner of making them. In the case of disagreement on suggested corrections, the hearing examiner shall determine the The procedures set forth in Section 10-60 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989, ch. at a scheduled hearing, conference or discovery procedure, regardless of whether all the parties are present, shall be considered as authorized ex parte communication. Suggested corrections to the transcript of record must be offered within ten (10) days after the transcript is filed in the proceedings, unless the Department and all parties mutually agree to the corrections. Suggested corrections shall be served upon or brought to the attention of such party whose appearance is of record or his or her attorney, the official reporter and the hearing examiner. If suggested corrections are not objected to, the hearing examiner will Administrative Procedure Act (III. Rev. Stat. 1989, ch. 127, par. 1010-60, as amended by P.A. 87-823, effective July 1, 1992) relative to ex parte contacts shall be mannor in which the record shall be changed on the basis of followed. Any communication made openly or on the record his written notes of the hearing.
- each case supported by concise findings of fact and appropriate conclusions of law. The decision or order shall be presented and sonform with the requirements of The Director or hearing examiner shall adopt a decision in

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decision rendered shall be the final administrative such decision or order shall be provided in accordance with petition for reconsideration or stay is granted (see 8 111, Adm. Gode Section 14 of the Administrative Proceedures Act. A copy of Section 14 of the Administrative Procedures Act. unless a ageney, 1.315 through 1.350). of the decision

effective Ill. Reg. at 16 Amended (Source:

Decision and Order Section 1.77

- written order for each contested case. The order shall be supported by concise findings of fact and conclusions of law. The order shall be signed by the Director or administrative law judge. The Director or administrative law judge shall prepare a
- the requirements of Section 10-50 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989, ch. 127, par. 1010-50, as amended by P.A. 87-823, effective July 1, 1992). A copy of such decision or order shall be provided to each party in accordance with Section 10-50 of The decision or order shall be presented and conform with the Illinois Administrative Procedure Act. a
- Findings of fact and conclusions of law shall be separately ্য
- of fact shall include specific references principal supporting items of evidence in the record. Findings 히
- The Department's final order may include any or all of the following as authorized by the law or rule under which the contested case was held: a
- A direction to cease and desist from violations of the statute, Department's rules or orders;
- Suspension of a license(s) or permit(s); 7
- Revocation of a license of permit; 3
- Such other determinations that may be appropriate according to the law administered by the Department or the rules for that law (e.g., payment of monetary penalties) 4

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- The administrative law judge's order shall be the final administrative decision of the Department, unless the respondent petitions the Director for a stay or reconsideration of the administrative law judge's decision within the time period specified in Section 1.114. 4
- in any contested case hearing, the Director's decision shall be the final decision of the Department. The final decision of the Department is subject to Administrative Review (Code of Civil Procedure (Ill. Rev. Stat. 1989, ch. or stay shall be the final decision of the Department. The Director's decision on a petition for reconsideration When the Director functions as the administrative law judge 110, par. 3-101 et seq.)). 白

effective Reg. 16 Ill. at Added (Source:

Subpoenas Section 1.80

- the request to the issues in the hearing. For good cause any party to the proceeding. The Director or the administrative law judge may require the party requesting issuance of subpoenas to demonstrate the relevancy of shown, the Director or the administrative law judge may deny or modify the request for subpoenas. testimony by witnesses, and subpoenas duces tecum requiring the production of books, papers, records or memoranda may be issued by the Director or the administrative law judge upon her or her own motion or upon the written request of qiving and the Subpoenas requiring that attendance a
- ludge upon the request of a party to the proceeding shall be delivered to the requesting party who shall be responsible for serving the subpoenas. Subpoenas shall be Subpoenas issued by the Director or the administrative law served personally or by certified mail. a
- issued shall be responsible for paying any witness fee for attendance and travel to the formal administrative proceeding. When a witness is subpoenaed by the Director or administrative law judge upon his or her own motion or upon the request of the Department, the witness fee shall The witness fee for attendance and travel shall be the same this State. The person who requests that a subpoena be be paid in the same manner as other expenses of the agency. as the fee of the witnesses before the Circuit Courts of attendance 히

Subpocnas for the attendance of witnesses from any place in the

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the Department upon its own metion or upon application of any party in writing upon a showing that a subpoena is required to obtain evidence necessary for disposition of the case. decuments at a hearing in a pending proceeding will be issued by State of Illinois or for the production of books, papers, accounts

effective Ill. Reg. 16 aţ Amended (Source:

Witnesses Section 1.85 During the pendency of any proceeding, the Department, its administrative law judge hearing examiner, or any party may depose any witness in a manner which conforms to the provisions of the laws of this State

effective 16 Ill. Reg. at Amended (Source:

Continuances of Proceeding Section 1.90

the Department during the pendency of the proceeding shall be granted by the Director or the administrative law judge hearing examiner if they are not repetitious, do not unnecessarily delay the proceedings, and do not work a hardship on witnesses, unless Continuances and extensions of time for compliance with orders of there is imminent danger to the public health, safety or welfare.

effective Reg. Amended at 16 Ill. (Source:

Submitting Petition for Reconsideration or Stay of Administrative Action Section 1.95

After a decision is rendered by the Director or <u>administrative law</u> submit a petition for reconsideration or stay of administration action as outlined in Sections 1.112 through 1.128 Subpart C of judge hearing examiner, a person affected by the decision may

effective Ill. Reg. 16 at Amended (Source:

of Stay OĽ Section 1.112 Petition for Reconsideration Administrative Action: Initiated by Department The Director may at any time on his or her own initiative or on the petition for reconsideration or stay of action of the respondent in

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reconsideration or stay of administrative action shall be granted grant a stay or reconsider a decision on his or her own initiative where justified by additional information or by changes in circumstances that would warrant reconsideration or stay. any contested case reconsider any matter or may at any time stay (including extend) the effective date of any relevant action in accordance with Sections 1.126 and 1.128. The Director shall following a decision on any matter.

effective 16 Ill. Req. Added at (Source:

Section 1.114 Petition for Reconsideration or Stay of Administrative Action: Initiated by Affected Party; Time Limit

indefinite period. A petition for reconsideration or stay of action shall be submitted within 30 days of the date of the administrative law ludge's decision on the case. A petition for reconsideration or stay of action submitted later than 30 days after the date of the decision involved shall be denied as any part or all of the decision of the administrative law judge on any petition or may request the Director to stay the effective date of any administrative action for a specific period or for an The respondent in any contested case may request reconsideration of untimely. effective Reg. 111. 16 at Added (Source:

Petition for Reconsideration: Format and Content Section 1.116 A petition for reconsideration shall be in the form and contain the information requested as shown in Illustration B. effective Reg. 111. 16 at Added (Source: Petition for Stay of Administrative Action: Format Section 1.118 and Content

A petition for stay of administrative action shall be in the form and contain the information stated in Section 1.116, except that the title of the document shall be "Petition for Stay of Administrative Action." effective Reg. 111. 16 at Added (Source:

Petition for Reconsideration: Based Upon Section 1.120

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Administrative Record

A petition for reconsideration shall be based upon the data, information and views contained in the administrative record upon which the administrative law judge made a decision.

(Source: Added at 16 Ill. Reg. ____, effective

Section 1.122 Petition for Reconsideration or Stay of Administrative Action: Signing Petition, Legality, Date Considered Submitted, Computing Time Limits, and Receipt for Such Document

The provisions of Sections 1.205, 1.235, 1.240, 1.245, and 1.250 of Subpart. C of these rules shall apply to petitions for reconsideration or stay of administrative action.

(Source: Added at 16 Ill. Reg. ____, effective

Section 1.124 Petition for Reconsideration or Stay of Administrative Action: Director's Decision; Time Limit

The Director shall review a petition for reconsideration or stay of administrative action and within 90 days from the date of receipt of such petition notify the petitioner in writing of his or her decision. The Director's decision on the matter which was reconsidered or stayed shall be the final administrative decision of the agency. The Director's decision shall be based on the administrative record and made in accordance with Section 10-50 of the Illinois Administrative Procedure Act (III. Rev. Stat. 1989, ch. 127, par. 1010-50, as amended by P.A. 87-823, effective July 1, 1992).

(Source: Added at 16 Ill. Reg. _____, effective

Section 1.126 Petition for Reconsideration: Criteria for Granting Petition The Director shall grant the petition for reconsideration if he or

she determines that all of the following apply:

a) The petition demonstrates that relevant data, information or views contained in the administrative record were not previously or not adequately considered by the

b) The petitioner's position is not frivolous and is being

administrative law judge.

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pursued in good faith.

c) Granting the petition is not outweighed by a preponderance of the evidence.

(Source: Added at 16 Ill. Reg. ____, effective

Criteria for Granting Petition

Section 1.128 Petition for Stay or Delay of Administrative Action:

The Director shall grant a stay or delay any administrative action if:
a) The Director determines that a stay or delay is in the

a) The Director determines that a stay or delay is in the public interest. A stay would be in the public interest if the decision would be detrimental to the industry, outweighed by public health and safety considerations or if requests from the industry on the whole were received.

b) A court orders that the matter be stayed.

c) The delay resulting from the stay is not outweighed by other considerations or other public interests.

(Source: Added at 16 Ill. Reg. _____, effective

SUBPART C: PETITIONS

Section 1.225 Petitions: Written Comments on Petition Filed with Director

All written comments, objections, notices, compilations of data and information and any other documents in regard to a petition shall be filed with the Director or with a duly authorized representative of the Department the hearing examiner, whichever the case may be.

(Source: Amended at 16 Ill. Reg. ____, effective

Section 1.240 Petitions: Considered Submitted

Submissions shall be considered as submitted on the date on which they are postmarked or, if delivered in person during regular business hours, on the date on which they are so delivered. All such submissions shall be mailed or delivered in person to the Director or to a duly authorized representative of the Department the hearing examiner (if appointed), Illinois Department of

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Petitions: Agency's Responses; Time Limit Section 1.265

- The Director's agency's response shall be furnished to each petitioner in writing within 30 days of the receipt of the petition and shall state the reasons for the action taken. Such response shall either: 4
- \underline{a}^{\pm}) approve the petition, in whole or in part,
- deny the petition, (20)
- provide a tentative response indicating why the agency has been unable to reach a decision on the petition, or (f)
- to the initiate administrative proceedings in regard petition. <u>d</u>4)
- Upon denial of a petition, the petitioner has the right to petition for stay of action or reconsideration of the decision in accordance with 8 Ill. Adm. Code-1.315 or to a hearing in accordance with the procedures of Subpart B of ቷ

effective Reg. 111. 16 at Amended (Source:

Public Hearing on Petition: Who May Testify Section 1.270

may also invite interested persons to testify or to submit written comments on the petition. Such comments shall be signed by the person making the submission or by an attorney or other authorized At any public hearing, the petitioner may invite <u>affected</u> persons to attend and testify in regard to the petition. The Department representative on the person's behalf.

effective Ill. Reg. 16 at Amended (Source:

for Procedure Petition: G Hearing Public Conducting the Hearing Section 1.275

beginning of the hearing the manner in which the hearing will be hearing officer examiner shall state at or The Director

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to the number of people wishing to testify, the time the hearing starts, weather conditions and other commitments of Department conducting the hearing. Procedures and time limits vary according time limits for testifying and any other procedures for conducted, personnel.

effective Reg. 111. 16 at Amended (Source:

Registration of Petition: o Public Hearing Section 1.280 Witnesses Any person requesting time to make an oral presentation on any petition or order of the Department at any public hearing must register prior to the beginning of the hearing. Persons will be called to testify in the order of registration, unless the hearing officer examiner determines otherwise in accordance with procedures forth in Section 1.275.

Reg. 111. 16 at Amended (Source:

Person Representing Organization, Association or Another Person Section 1.285

A person may represent an association, organization or other group or an individual who is unable to attend. The Director or hearing officer examiner shall request such person to present proof indicating he is authorized to represent the association, organization or another individual when not familiar with the letter, affidavit or verbal person. Acceptable proof means a letter, affidavit or verbal verification from an officer of the organization or person being represented Reg. 111. 16 at Amended (Source:

Decision Based Upon Record Section 1.295 on any petition exthe administrative order of the Department shall be based upon decision or hearing examiner's The Director's

effective Reg. 111. 16 at Amended (Source:

on Petition: Time Limit Decision Section 1.300

The Director or hearing examiner shall make a decision within 30

NOTICE OF PROPOSED AMENDMENTS

The agency shall notify the petitioner of the Director's or hearing within 30 days from receipt of the petition, whichever is later. examiner's decision in writing. The Director's decision shall be on the petition days following a public hearing or meeting the final decision of the Department.

effective at 16 Ill. Reg. Amended (Source:

Section 1.305 Petitioner's Rights to a Private Meeting

persons to participate fully in the meeting or conference without giving prior notice to the Department. Such meeting shall be conducted informally; however, the Department shall record the A petitioner has the right to a private meeting or conference with representatives of the Department in regard to a petition on request. The Director shall determine which representatives of the Department shall attend such meeting. The person requesting the minutes of the meeting or conference stenographically or by such other means as to adequately insure the preservation of the minutes meeting may request but not require the attendance of for the Department's administrative file.

effective Amended at 16 Ill. Reg. Section 1.310 Petition for Reconsideration or Stay of Administrative Action: Initiated by Department or Departmental (Repealed) Advisory Board

warrant reconsideration or stay, A departmental advisory board or statutorily established advisory board or committee may upon a petition for reconsideration or stay of action of any person administrative action shall be granted in accordance with 8 ill. <u>additional information or by changes in circumstances that would</u> majority vote of its members reconsider any matter which was The Director may at any time on his own initiative or on the reconsider any matter or may at any time stay (including extend) the effective date of any relevant action pending or following a <u>reconsider a decision on his own initiative where justified by</u> decision on any matter. A petition for reconsideration or stay -The Director will grant a stay Adm. Code 1.345 and 1.350. brought before the board.

effective	
Reg.	
111.	
16	
at	_
epealed	
Repe	
Source:	

of Stay or Reconsideration for Petition 1.315 Section

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DEPARTMENT OF AGRICULTURE

NOTICE OF PROPOSED AMENDMENTS

Administrative Action: Initiated by Interested Person; Time Limit (Repealed

any part or all of the decision of the Director or hearing examiner on any petition or may request the Director to stay the effective date of any administrative action for a specific period or for an indefinite period. A petition for reconsideration or stay of action shall be submitted within 30 days of the date of the decision involved. A petition for reconsideration or stay of action submitted later than 30 days after the date of the decision Any person affected by the decision may request reconsideration of involved shall be denied as untimely.

effective 16 Ill. Reg. at Repealed (Source:

Petition for Reconsideration: Format and Content Section 1.320 (Repealed)

A petition for reconsideration shall be in the form and contain the information requested as shown in Illustration B. 16 Ill. Reg. at Repealed (Source:

Section 1.325 Petition for Stay of Administrative Action: Format and Content (Repealed) A petition for stay of administrative action shall be in the form except that the title of the document shall be "Petition for Stay -contain the information stated in 8 Ill. Adm. Code 1.320, of Administrative Action."

effective Ill. Reg. Repealed at 16 (Source:

Upon Reconsideration: for Administrative Record (Repealed) Petition Section

which the Director or hearing examiner made a decision. Any porson who wishes to rely upon data, information or views not included in information and views contained in the administrative record—on the administrative record shall submit it to the Director as a new A petition for reconsideration shall be based upon the data,

effective 111. 16 at Repealed (Source:

NOTICE OF PROPOSED AMENDMENTS

Administrative Action: Signing Petition, Legality, Date Considered of Submitted, Computing Time Limits, and Receipt for Such Document Stay or Reconsideration for Petition 1.335 (Repealed) Section

The provisions of Sections 1.205, 1.235, 1.240, 1.245, and 1.250 of shall apply to petitions for recensideration or stay of administrative action. of these rules Subpart

effective Reg. 111. 16 at Repealed (Source:

(Repealed) Stay o Administrative Action: Director's Decision; Time Limit Reconsideration for Petition Section 1.340

administrative action and within 30 days from the date of reseipt The Director's decision on the matter which was reconsidered or The Director's decision shall be based on the administrative resert <u> The Director shall review a petition for reconsideration or stay of </u> of such petition notify the petitioner in writing of his decision. stayed shall be the final administrative decision of the agency. and made in accordance with Section 14 of the Illinois Naministrative Procedure Act. effective 16 Ill. Reg. at Repealed (Source:

Petition for Reconsideration: Criteria for Granting Petition (Repealed) Section 1.345

The <u>Birector shall reconsider any prior decision of the agency if</u> he determines that all of the following apply:

- The petition demonstrates that relevant data, information or views contained in the administrative resord were not considered -adequatelyadministrative law judge. previously or not t
- The petitioner's position is not frivolous and is being pursued in good faith. #
- <u>Reconsideration is not outweighed by a preponderance of the</u> evidence. ₽

effective Reg. 111. 16 at Repealed (Source: Petition for Stay or Delay of Administrative Action: Section 1.350 Petition for Stay or Delay o Criteria for Granting Petition <u>(Repealed)</u>

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DEPARTMENT OF AGRICULTURE

NOTICE OF PROPOSED AMENDMENTS

The Director shall grant a stay or delay any administrative astion

- public interest. A stay would be in the public interest if outweighed by public health and safety considerations or if <u>The Director determines that a stay or delay is in the </u> the decision would be detrimental to the industry, requests from the industry on the whole were received. ⇟
- b) A court orders that the matter be stayed,
- to not outweighed by or other public interests The delay resulting from the stay other considerations ቱ

effective Reg. 111. 16 at Repealed (Source:

DECLARATORY RULINGS SUBPART D: Declaratory Rulings: Advisory Opinion (Repealed) Section 1.400

specific applicability of a statute, rule or order of the Any person may request an advisory opinion with respect to the Department effective Reg. 111. 16 at Repealed (Source: Request for An Advisory Opinion; Format and Content, (Repealed) Date Considered Received, and Receipt Section 1.410

The request for an advisory opinion shall be subject to the A request for an advisory opinion shall be submitted in the form of a petition as outlined in 8 ill. Adm. Code 1,200, except that the title of the document shall be "Request for An Advisory Opinion." provisions of 8 Ill. Adm. Code 1.200, 1.205, 1.210, 1.240, 1.245, and 1,250. effective Ill. Reg. 16 at Repealed (Source:

Agency's Response; Time Limit (Repealed) Section 1.415

deadlines shall be computed in accordance with 8 111. Adm. Code The agency's response shall be furnished to the petitioner writing within 30 days of the receipt of the petition.

effective Reg. 16 111. Repealed at (Source:

NOTICE OF PROPOSED AMENDMENTS

Section 1.420	O Criteria for Denying Request for An Advisory Opinion	for	Denying	Request	for	An	Advisory	Opinior
(Repealed)								

The request for an advisory opinion shall be denied if t

- a) the request contains incomplete information on which to effective b) the matter is under review by the Department or by a court, Reg. 111. 16 at base an opinion, or Repealed (Source:

Formal Position of The Department (Repealed)

Section 1.425

<u>An advisory opinion represents the formal position of the</u> Department on the specific-matter presented.

effective Reg. 16 III. at Repealed (Source:

to show good faith reliance and the petitioner may rely on the Advisory Opinion in Administrative <u>An advisory opinion may be used in administrative proseedings only</u> o f Use Proceedings (Repealed) Section 1.435

effective opinion as long as circumstances and facts remain the same. 16 Ill. Reg. at Repealed

Informal Department; Employee of ρχ Advice 1.445 Section

Communication <u>(Repealed)</u>

issued in writing pursuant to this Subpart. A statement or advice given by a Department employee orally or in writing but not purcuant to this Subpart is an informal communication that <u>Department shall constitute an advisory opinion only if it is</u> represents the best judgment of that employee at that time. <u>A statement made or advice provided by an employee</u>

effective Reg. 16 111. Repealed at (Source:

SUBPART E: AVAILABILITY FOR PUBLIC DISCLOSURE OF DEPARTMENT OF AGRICULTURE FILES

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NOTICE OF PROPOSED AMENDMENTS DEPARTMENT OF AGRICULTURE

Section 1.500 Availability of Information Contained in Department Records for Inspection and/or Copying; Procedure to be Followed

copying in accordance with the provisions of The Freedom of Information Act (Supp. to Ill. Rev. Stat. 1989 1983, ch. 116, par. 201 et seq.) and the rules adopted pursuant thereto (2 Ill. Adm. Department of Agriculture shall be available for inspection and/or copying by the public unless exempted from such inspection and/or Code 701: Subpart B). When a person desires to inspect and/or obtain a copy of public records of the Department, the procedure to be followed shall be as set forth in The Freedom of Information Act þ maintained records and the rules adopted pursuant thereto. public in contained Information

effective Ill. Reg. 16 at Amended (Source:

Section 1. ILLUSTRATION A Petition

Department of Agriculture Springfield, Illinois State Fairground

PETITION

62706

statutory reference, if known) to request the Director of Agriculture to (amend, issue, or revoke a regulation ex ordex or take or refrain from taking any other form of administrative The undersigned submits this petition pursuant to (relevant action)

- Action Requested. A)
- or revoke a rule or regulation, the exact wording of the proposed regulation or amendment requested. If the petition requests the Director to issue,
- If the petition requests the Director to issue, amend or revoke an order, a copy or the exact wording of and citation to the existing order (if any) and the exact wording requested for the proposed order. 4
- refrain from taking any other form of administrative action, the specific action or relief requested. the petition requests the Director to 23)

NOTICE OF PROPOSED AMENDMENTS

Statement of Grounds B (A full statement of the factual and legal grounds upon which the petitioner relies. Such grounds shall include all relevant data, information and views on which the petitioner relies and fiscal implications, if applicable.)

The undersigned certifies that, to the best of such person's knowledge and belief this petition includes all data, information and views on which the petition relies, known to the petitioner which are unfavorable to the and that it includes representative data and information petition.

Very truly yours,

(Signature)

(Complete Mailing Address)

(Telephone number)

effective Reg. 111. 16 at Amended (Source:

Section 1.ILLUSTRATION B Petition For Reconsideration

(DATE)

Department of Agriculture Director

Stāte Fairgrounds Springfield, Illinois 62706

PETITION FOR RECONSIDERATION DOCKET NO. The undersigned submits this petition for reconsideration of the administrative law judge Director or hearing (A concise statement of the decision of the <u>administrative law judge Director or hearing examiner</u> which the petitioner wishes to have reconsidered.) Decision Involved. examiner. A A

Action Requested. (The decision which the petitioner requests the Director to make upon reconsideration of the Action Requested. B)

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DEPARTMENT OF AGRICULTURE

NOTICE OF PROPOSED AMENDMENTS

matter.)

legal grounds upon which the petitioner relies. Such grounds shall demonstrate that relevant data, information and views contained in the administrative record were not (A full statement of the factual and administrative law judge Director or hearing examiner.) not adequately considered Statement of Grounds. or previously ົວ

Very truly yours,

(Signature)

(Complete Mailing Address)

(Telephone Number)

effective Reg. 111. 16 at Amended (Source:

DEPARTMENT OF AGRICULTURE

NOTICE OF PROPOSED RULES

- .) Heading of Part: Specialty Farm Product Buyers Act
- 2) Code Citation: 68 Ill. Adm. Code 580
- Section Numbers: Proposed Action: 580.10 New Section New Section 580.30 New Section 580.40 New Section 580.50 New Section
- 4) <u>Statutory Authority:</u> Sections 15, 20, 30, 35 and 40 of the Specialty Farm Product Buyers Act (P.A. 87-171, effective January 1, 1992).
- A Complete Description of the Subjects and Issues Involved:
 These rules are intended to implement the Specialty Farm
 Product Buyers Act. The proposed rules identify who must
 register and establish the procedure for doing so. Products
 identified as specialty farm products are: sweet corn, snap
 beans, green peas, tomatoes, cucumbers, popcorn, potatoes
 and pumpkins.

The information that must be contained in a written complaint is identified in the rules.

- 6) Will this proposed rule replace an emergency rule in effect?: No
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this proposed rule contain incorporations by reference?
 No
- 9) Are there any other amendments pending on this Part? No
- Statement of Statewide Policy Objectives: Rule does not affect units of local governments.
- 11) Time, Place and Manner in which interested persons can comment on this proposed rulemaking:

A 45-day written comment period will be granted for receiving comments from the public. This comment period will begin on the day the notice of rulemaking appears in the Illinois Register. Comments should be sent to Judith Lozier, General Counsel, Department of Agriculture, State Fairgrounds, P.O. Box 19281, Springfield, Illinois 62794-

ILLINOIS REGISTER

DEPARTMENT OF AGRICULTURE

NOTICE OF PROPOSED RULES

12) Initial Regulatory Flexibility Analysis: A) Date rule was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: June 2, 1992

b) Types of small businesses affected: Anyone engaged in the business of buyer specialty farm products from a producer, except for any Illinois producer purchasing specialty farm products incidental to his own production operation and retail grocery merchants having a fixed or established place of business in Illinois.

compliance:
Specialty farm product buyers must register with the
Department. The application for registration must be
accompanied by a current financial statement and the
required registration fee.

D) Types of professional skills necessary for compliance: Basic management and bookkeeping.

The full text of the Proposed Rules begins on the next page:

DEPARTMENT OF AGRICULTURE

NOTICE OF PROPOSED RULES

TITLE 68: PROFESSIONS AND OCCUPATIONS CHAPTER II: DEPARTMENT OF AGRICULTURE SUBCHAPTER b: PROFESSIONS AND OCCUPATIONS

SPECIALTY FARM PRODUCT BUYERS ACT

Administrative Hearing Application of Registration Definitions Complaint Section 580.30 580.10 580.40 580.20

AUTHORITY: Authorized by and implementing the Specialty Farm Product Buyers Act (P.A. 87-171, effective January 1, 1992).

effective 16 Ill. Reg. at Adopted SOURCE:

Definitions 580.10

"Act" means the Specialty Farm Product Buyers Act (P.A. 87-171, effective January 1, 1992).

Application of Rules 580.20

- who buys specialty farm products from producers in Illinois, shall be covered under the Act and these rules Any Illinois producer purchasing specialty farm products incidental to his or her own production operation shall for that part of the business that comes from Illinois. Except as otherwise set forth in this Section, any buyer not be considered to be a specialty farm product buyer. a)
- Specialty farm products shall include sweet corn, snap beans, green peas, tomatoes, cucumbers, popcorn, potatoes and pumpkins. a

Registration 580.30

accompanied by a current financial statement and the registration fee required by Section 20 of the Act. The financial statement shall set forth the assets and liabilities and the net worth of the applicant. For a financial statement to be current, it must be received by The application for registration as a buyer shall be Department within five months of the a)

ILLINOIS REGISTER

DEPARTMENT OF AGRICULTURE

NOTICE OF PROPOSED RULES

statement date.

- When any registrant changes the address of the permanent business location or adds or deletes additional locations or agents, the buyer shall file within 30 days an amendment to his or her registration application on a form provided by the Department. q
- Registrations shall expire one year from the date of issuance. Applications for registration renewal shall be submitted prior to expiration of the current registration. Applications for renewal shall also be accompanied by a current financial statement and a renewal fee of \$100. ΰ

Complaint

The Department shall accept any written complaint setting forth facts which if provided would constitute a violation of the Act. Such written complaint shall at a minimum contain the following information:

- The name and address of the complainant. a)
- The name and address of the buyer Q
- The specialty farm product involved. ์
- constitute grounds for refusal, suspension or revocation of a registration under the Act. proved if A description of the facts which ð

Administrative Hearing 580.50

Illinois Administrative Procedure Act (III. Rev. Stat. 1989, ch. 127, par. 1001-1 et seq.) and the Department's Administrative Rules (8 III. Adm. Code 1) which pertain to administrative hearings, petitions, proceedings, contested cases and availability of Department files for public access. Administrative hearings are governed by the Illinois Administrative Procedure Act and Subpart B of the Department's Administrative Rules. All decisions and actions of the Department are subject to the

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

Heading of the Part: Merit and Fitness

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- 80 Ill. Adm. Code 302 Code Citation: 5)
- Section number 3
- Proposed Action:
- 302.822
- Amendment
- Statutory Authority: Implementing and authorized by the Personnel Code [ITT. Rev. Stat. 1991, ch. 127, pars. 63b101, et seq.) 4
- A Complete Description of the Subjects and Issues Involved: 2)

The Personnel Code and rules provide that term appointees are subject to Jurisdictions A, B, and C during the period of their term. The Department is proposing this amendment to make clear that this includes the rules relating to intra-agency and inter-agency transfers. The proposed amendment also provides that the terms of individuals who are transferred will not terminate or be extended because of the transfer.

- Will this proposed amendment replace an emergency rule currently in effect? 9
- ું date? Does this rulemaking contain an automatic repeal ~
- Ę Does this proposed amendment contain incorporations by reference? 8
- Are there any other proposed amendments pending on this Part? 6
- Statement of Statewide Policy Objectives: Rulemaking does not affect units of local government. 6
- 11) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may submit written comments within 45 days of the date of publication to:

720 Stratton Office Building Springfield, IL 62706 Stephen W. Seiple (217)782-9669

Does not apply to small 12) Initial Regulatory Flexibility Analysis:

The full text of the Proposed Amendment begins on the next page

ILLINOÍS REGISTER

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES SUBTITLE B: PERSONNEL RULES, PAY PLANS, AND POSITION CLASSIFICATIONS CHAPTER I: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

PART 302 MERIT AND FITNESS

APPLICATION AND EXAMINATION SUBPART A:

		and							
4.		Postponement							
	Examinations	Time, Place, Conduct, Cancellation, Postponement and	Examinations	Veterans Preference	Announcement of Examination	Notice to Eligibles	Grading Examinations	Retaking or Regrading Examinations	oplication and Eligibility
			úì	>	Ē	ž	Ĝ	æ	₹
Section	302.10	302.20		302.30	302.40	302.52	302,55	302,60	302,70

1 Suspension of

SUBPART B: APPOINTMENT AND SELECTION

302.80 302.90 302.91 302.100 302.105 302.120 302.130 302.140 302.140	Eligible Lists	Appointments	Alternative Employment	Geographic Preference	Pre-Employment Screening	Appointment From Eligible List	Responsibilities of Eligibles	Removal of Names From Eligible Lists	Replacement of Names on Eligible List	Appointment and Status	Extension of Jurisdiction B	
	302.80	302.90	302.91	302.100	302,105	302,110	302,120	302,130	302.140	302,150	302,160	

Section

TRAINEES SUBPART C:

Appointments Programs Section 302.170 302.175 302.175

Limitations on Trainee Appointments

CONTINUOUS SERVICE SUBPART D:

Interruptions In Continuous Service Deductions From Continuous Service Definitions Section 302.190 302.200 302.210

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

SUBPART E: PERFORMANCE REVIEW

Section

302.260 Performance Records 302.270 Performance Evaluation Forms	SUBPART F: PROBATIONARY STATUS	Probationary Period Certified Status Status Change in Probationary Period
302.260 302.270		Section 302.300 302.310 302.320

SUBPART G: PROMOTIONS

TOWNER TOWN OWN THE TOWNER		
Failure to Complete Probationary Period	302.340	
Limitations On Promotions	302.335	
Eligibility for Promotion	302,330	
	Section	

SUBPART H: EMPLOYEE TRANSFERS

Transfer .	Intra-Agency Transfer Inter-Agency Transfer	Merit System Transfer	Geographical Transfer (Agency Directed)	Geographical Transfer (Agency Directed) Procedures	Notice To Employee	Effective Date of Geographical Transfer (Agency Directed)		Rights of Transferred Employees	Transfer of Duties	Limitations on Transfers	Employee Records
Section 302,400	302,410	302, 425	302,430	302.431	302.432	302.433	302,435	302,440	302.445	302.450	302.460

SUBPART I: DEMOTION

		Employee
	Demotion	Notice to
Section	302.470	302,480

Notice to Employee	,	Employee Obligations	
 302, 480		302.490	

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

Employee			
Salary and Other Benefits of	302,496 Appeal by Certified Employee	Demotion of Other Employees	302.498 Status of Demoted Employees
302.495	302,496	302,497	302,498

SUBPART J: VOLUNTARY REDUCTION AND LAYOFFS

nary Employees	4 <u>-</u>		u	
Voluntary Reduction of Certified and Probationary Employees Limitations in Voluntary Reduction Definition of Layoff	Temporary Layorf Use of Accrued Benefits During Temporary Layoff Notice of Temporary Layoff Return from Temporary Layoff Scheduling of Temporary Layoffs Deferral of Wages	Indeterminate Layoff Procedure Voluntary Indeterminate Layoff Disapproval Order of Layoff Effective Date of Layoff	Employee Upportunity to Seek Voluntary Keduction Order of Preference in Voluntary Reduction Reemployment Lists Employment From Reemployment List Removal of Names From Reemployment List Laid Off Probationary Employee	Appeal by Employee Reinstatement from Layoff Resignation Reinstatement
Section 302.500 302.505 302.507	302.512 302.514 302.516 302.518 302.518	302.520 302.523 302.523 302.530 302.540	302, 550 302, 550 302, 570 302, 590 302, 590	

SUBPART K: DISCHARGE AND DISCIPLINE

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

Reinstatement from Suspension or Discharge Suspension or Discharge Resulting From Arrest or Criminal Indictment Discharge of Probationary Employees Discharge of Certified Employee Prohibition of Discrimination Notice to Employee Appeal by Employee 302.720 302.730 302.750 302.780 302.781 302.785

SUBPART L: TERM APPOINTMENTS

Effect of Loss of Federal Funding on Employees Excluded from Term No Promotion to Positions Covered by Term Appointments (Repealed) Appointment by Reason of Being Federally Funded (Repealed) Reemployment Rights to Term Appointment Positions Subject to Term Appointments Appointees Under Term Appointments No Reallocation to Term Positions Expiration of Term Appointment Definition of Terms Renewal Procedures Appointment 302.800 302.810 302.820 302.821 302.822 302.823 302.824 302.825 302.830 302.840 Section

Implementing and authorized by the Personnel Code (III. Rev. Stat. 1991, ch. 127, par. 63b101 et seq.) AUTHORITY:

Renewal of Certified or Probationary Incumbents in Exempted Positions

Renewal Procedures for Incumbents on the Effective Date of Section

Change in Position Factors Affecting Term Appointment Exclusion Renewal Procedure for Incumbents Subject to Public Act 83-1369

Reconsideration Request

302.842 302.846 302.850 302.860 302.863

Effective Date of Reappointment or Termination (Repealed)

8b18 of the Personnel Code (Repealed)

SOURCE: Filed May 29, 1975; amended at 2 III. Reg. 33, p. 24, effective September 1, 1978; amended at 3 III. Reg. 1, p. 63, effective January 1, 1979; amended at 3 III. Reg. 22, p. 78, effective June 1, 1979; emergency amendment at 3 III. Reg. 48, p. 188, effective January 1, 1980, for a maximum of 150 days; emergency amendment at 4 III. Reg. 1, p. 76, effective January 1, 1980, for a maximum of 150 days; amended at 4 III. Reg. 11, p. 75, effective March 1, 1980; amended at 4 III. Reg. 15, p. 216, effective March 1, 1980; amended at 5 III. Reg. 8029, effective August 1, 1981; amended at 7 III. Reg. 1318; amended at 8 III. Reg. January 5, 1983; codified at 7 III. Reg. 13198; amended at 8 III. Reg. 7788, effective Hay 23, 1984; emergency amendment at 9 III. Reg. 241, effective January 1, 1985, for a maximum of 150 days; amended at 9 III. Reg. 7907, effective May 15, 1985; amended at 10 III. Reg. 13940, effective September 1, 1986; amended emergency expired February 20, 1989; amended at 13 Ill. Reg. 3722, effective at 12 III. Reg. 5634, effective March 15, 1988; emergency amendments at 12 III. Reg. 16214, effective September 23, 1988, for a maximum of 150 days;

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF PROPOSED AMENDMENT

March 13, 1989; amended at 13 Ill. Reg. 10820, effective June 23, 1989; amended at 13 Ill. Reg. 12970, effective August 1, 1989; amended at 15 Ill. Reg. 17974, effective November 27, 1991; amended at 16 Ill. Reg. 8375, effective May 21, 1992; amended at 16 Ill. Reg. , effective

Section 302.822 Appointees Under Term Appointments

Appointees under Term Appointments shall be subject to Jurisdictions A, B, and C of the Personnel Code with all rights and obligations thereunder during the term of their appointment. Appointes shall be subject to the provisions of the Personnel Rules during the term of their appointment, including Sections 302.410 and 302.420. An intra-agency or inter-agency transfer may be to a term position and shall not operate to extend the incumbent's term or to terminate the appointment prior to expiration of the incumbent's term

(Source: Amended at 16 Ill. Reg.

CONSERVATION DEPARTMENT OF

NOTICE OF PROPOSED AMENDMENTS

- Fall ı Turkeys Taking of Wild The THE PART: Archery Season 1
- 17 Ill. Adm. Code 720 CODE CITATION:

5

- PROPOSED ACTION: Amendments SECTION NUMBERS: 720.30 3)
- STATUTORY AUTHORITY: Implementing and authorized by Sections 1.3, 1.4, 2.9, 2.10 and 2.11 of the Wildlife Code (Ill. Rev. Stat. 1991, ch. 61, pars. 1.3, 1.4, 2.9, 2.10 and 2.11). 4
- A COMPLETE DESCRIPTION OF THE SUBJECTS AND ISSUES INVOLVED: Section 720.30(d) is being removed to provide uniformity with the fall archery deer season. 2
- AMENDMENTS REPLACE AN EMERGENCY RULE 옷 THESE PROPOSED CURRENTLY IN EFFECT? 9
- 2 OGES THIS RULEMAKING CONTAIN AN AUTOMATIC REPEAL DATE? 2
- THESE PROPOSED AMENDMENTS CONTAIN INCORPORATIONS BY DO THESE REFERENCE? 8
- 16 III. Reg. 5466, 4/10/92 Illinois Register Citation ARE THERE ANY OTHER PROPOSED AMENDMENTS PENDING ON THIS PART? Proposed Action Amendments Amendments Amendments Amendments Section Numbers 720.10 720.20 720.30 720.40 Yes 6
- 2 This rule has STATEMENT OF STATEWIDE POLICY OBJECTIVES: impact on local governments. 10)
- ON THIS PROPOSED RULEMAKING: Comments on the proposed rule may be submitted in writing for a period of 30 days following publication of this notice to: TIME, PLACE AND MANNER IN WHICH INTERESTED PERSONS MAY COMMENT 11)

Department of Conservation 524 S. Second Street, Room 485 Springfield, IL 62701-1787 Don Woods

INITIAL REGULATORY FLEXIBILITY ANALYSIS: Not applicable 12)

THE FULL TEXT OF THE PROPOSED AMENDMENTS BEGINS ON THE NEXT PAGE:

ILLINOIS REGISTER

DEPARTMENT OF CONSERVATION

NOTICE OF PROPOSED AMENDMENTS

CHAPTER I: DEPARTMENT OF CONSERVATION SUBCHAPTER D: FISH AND WILDLIFE CONSERVATION TITLE 17:

THE TAKING OF WILD TURKEYS - FALL ARCHERY SEASON

Turkey Hunting Regulations Regulations at Various Department-Owned or -Managed Sites Hunting Seasons and Counties Open to Hunting Turkey Permit Requirements Section 720.30 720.40 720.50 720.10 720.20

AUTHORITY: Implementing and authorized by Sections 1.3, 1.4, 2.9, 2.10 and 2.11 of the Wildlife Code (Ill. Rev. Stat.1991, ch. 61, pars. 1.3, 1.4, 2.9, 2.10 and 2.11).

Releasing or Stocking of Turkeys (Repealed)

SOURCE: Adopted and codified at 8 III. Reg. 7825, effective May 22, 1984; emergency amendments at 8 III. Reg. 20086, effective October 12, 1985, for a maximum of 150 days; emergency expired March 2, 1985; amended at 9 III. Reg. 14311, effective September 5, 1985; amended at 11 III. Reg. 9556, effective May 5, 1987; amended at 12 III. Reg. 12254, effective July 15, 1988; amended at 13 III. Reg. 12831, effective July 20, 1990; amended at 14 III. Reg. 12413, effective July 20, 1990; amended at 15 III. Reg. 11611, effective August 2, 1991; Amended at 16 III. Reg. effective

Section 720.30 Turkey Hunting Regulations

is unlawful: It

- to use live turkey decoys, recorded calls, dogs or bait; a)
- attempt to take, more than I fall archery season (either take, or the harvested); during ţ Q
- to use any weapon except a long, recurved or compound bow with a minimum pull of 40 pounds at some point within a 28 inch drawn; a hunting arrow with a barbless broadhead is the only legal arrow. All other bows and arrows, including electronic arrow tracking systems, are illegal. Any mechanical device capable of maintaining a drawn or partially drawn position on a bow is illegal; Ω O

to hunt except from 1/2 hour before sum ise to sunset 후

DEPARTMENT OF CONSERVATION

NOTICE OF PROPOSED AMENDMENTS

during each day of the season,

- participate with a weapon in any hunting party for the purpose of taking additional turkeys; further ţ for any person having taken a wild turkey 뒫
- for any person to hunt wild turkeys without having a signed Archery Wild Turkey Hunting Permit in possession; ## #
- to transport or move a wild turkey without first affixing and properly sealing the adhesive-backed turkey permit securely around the leg. Leg tag must be affixed to the turkey immediately upon kill. No person shall leave any turkey that has been killed without properly attaching the turkey permit around the leg; 野野
- and feathers as indicated on the mail-in envelope to the Department in the envelope supplied within 48 hours of taking a turkey with bow and arrow. Failure to follow this rule constitutes illegal possession of a wild turkey to fail to send the mail-in portion of the turkey permit and is punishable by a fine plus turkey hunting privileges being suspended for the following year; and 五
- possess, while in the field during archery turkey season, any turkey permit issued to another person. 4

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- Public Schools Evaluation, Recognition Heading of the Part: and Supervision. ਜ
- 23 Ill. Adm. Code 1 Code Citation: 8

<u>e</u>	Section Numbers:	Proposed Action:
	1.230	Amendment
	1.240	Amendment
	1.420	Amendment
	1.440	Amendment
	1.720	Amendment
	1.730	Amendment
	1.735	Amendment
	1.736	New Section

- Statutory Authority: Ill. Rev. Stat. 1989 and 1990 Supp., ch. 122, pars. 2-3.25, 21-1 et seq., 27-20.4, and 27-20.5. 4
- A Complete Description of the Subjects and Issues Involved: The proposed changes result from the following:

2

- P.A. 86-1250, which adds the phrase "parental institutes" to Section 1.420(g); a)
- P.A. 86-1256, which adds requirements in social studies and history courses (Section 1.420(r)) for the study of the contributions of African Americans and women; â
- The need to make technical changes, update sections, and correct text errors in Sections 1.230(b), 1.240(f), 1.440(a)(11), 1.440(f), 1.440(f)(4) and 1.440(g); ΰ
- changes in the coursework required of secondary teachers of health and physical education (new Section State Teacher Certification Board recommendations for 1.736); and ਰ
- The need to clarify the applicability of existing requirements in Sections 1.720, 1.730 and 1.735. ê
- Will this proposed rule replace an emergency rule currently in effect? 9
- Does this rulemaking contain an automatic repeal date? ~

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- <u>Does this proposed amendment contain incorporations by</u> <u>reference</u>? The rules do not contain an incorporation by reference under Section 5-75 of the Illinois Administrative Procedure Act. 8
- Are there any other proposed amendments pending on this Part? No 6
- These rules will Statement of Statewide Policy Objectives: not create or enlarge a State mandate. 10)
- comment on this proposed rulemaking: Written comments may be submitted within 45 days of the publication of this Time, Place, and Manner in which interested persons may notice to: 11)

Agency Rules Coordinator Illinois State Board of Education 100 North First Street Springfield, 1111nois 62777-0001 (217) 782-3950

These rules will Initial Regulatory Flexibility Analysis: not affect small businesses. 12)

The full text of the Proposed Rule(s) begins on the next page:

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LE 23: EDUCATION AND CULTURAL RESOURCES SUBTITLE A: EDUCATION CHAPTER I: STATE BOARD OF EDUCATION JECHAPTER a: PUBLIC SCHOOL RECOGNITION SUBCHAPTER a: TITLE 23:

PART 1
PUBLIC SCHOOLS EVALUATION, RECOGNITION AND SUPERVISION

SUBPART A: RECOGNITION AND SUPERVISION

Section

1.10 Periodic Evaluation 1.20 Evaluation by Public School Approval Section and Regional Superintendent 1.30 Development of Learning Assessment and School Improvement Plans 1.40 Pending Further Audit 1.50 Three Types of Recognition Status 1.60 Reevaluation 1.70 Effective Dates for Recognition Status	
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SCHOOL GOVERNANCE SUBPART B:

Section

					District to Comply with 23 Ill. Adm. Code 175 and 185					
1.210	1.220	1.230	1.240	1.245	1.250	1.260	1.270	1.280	1.290	

SCHOOL DISTRICT ADMINISTRATION SUBPART C:

THE INSTRUCTIONAL PROGRAM SUBPART D:

SUPPORT SERVICES SUBPART E:

	Transportation	School Food Services	Health Services	Pupil Personnel Services	
Section	1.510	1.520	1.530	1.540	

STAFF CERTIFICATION REQUIREMENTS SUBPART F:

Section

		y Teachers	of Junior High and	Grades	Teachers and Specified	x (6) and Above	у 1, 1991	y 1, 1994			ices	rsonnel
	Minimum Requirements for Teachers	Minimum Requirements for Elementary Teachers	Minimum Requirements for Teachers of Junior High and	Departmentalized Upper Elementary Grades	Minimum Requirements for Secondary Teachers and Specified	Subject Area Teachers in Grades Six (6) and Above	Requirements to Take Effect on July 1, 1991	Requirements to Take Effect on July 1, 1994	Standards for Reading	Standards for Media Services	Standards for Pupil Personnel Services	Standards for Special Education Personnel
Section	1.705 Mi	1.710 Mi	1.720 Mj	ă	1.730 Mi	ร	1.735 Re	1.736 Re		1.750 St	1.760 St	1.770 St

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	Professional Staff Certification	Certification Quick Reference Chart	Glossary Of Terms
	SECTION 1. APPENDIX A	SECTION 1. APPENDIX B	SECTION 1. APPENDIX C
	;	;	;
•	SECTION	SECTION	SECTION

Substitute Teacher

1.790

10-17a, 10-20.14, 10-22.43a, 14C-8, 26-13, 27-12.1, 27-13.1, 27-20.3, 27-20.4, 27-20.5, 27-22, and 27-23.3 and authorized by Section 2-3.6 of the School Code (Ill. Rev. Stat. 1989 and 1990 Supp., ch. 122, pars. 2-3.25, 2-3.43, 2-3.44, 2-3.96, 10-17a, 10-20.14, 10-22.43a, 14C-8, 26-13, 27-12.1, 27-13.1, 27-20.3, 27-20.4, 27-20.5, 27-22, 27-23.3, and 2-3.6). Implementing Sections 2-3.25, 2-3.43, 2-3.44, 2-3.96, AUTHORITY:

SOURCE: Adopted September 21, 1977; codified at 7 Ill. Reg. 16022; amended at 9 Ill. Reg. 8608, effective May 28, 1985; amended at 9 Ill. Reg. 17766, effective November 5, 1985; emergency amendment at 10 Ill. Reg. 14314, effective August 18, 1986, for a maximum of 150 days; amended at 11 Ill. Reg. 3073, effective February 2, 1987; amended at 12 Ill. Reg. 4800, effective February 26, 1988; amended at 14 Ill. Reg. 12457, effective July 24, 1990; amended at 15 Ill. Reg. 2692, effective February 1, 1991; amended at __ Ill. Reg.

Capitalization denotes statutory language NOTE:

SUBPART B: SCHOOL GOVERNANCE

Section 1.230 Board of Education and The the School Code

when discharging its responsibilities associated with the paying, appointment and establishment of salaries for all teaching The board of education shall fully observe The the School Code personnel.

- or abridged on account of sex by the State or its units of local government and school districts." staff shall be in accordance with Article I, Section 18 of the Constitution of Illinois of 1970 which states: "The equal protection of the laws shall not be denied The hiring of both professional and nonprofessional a)
- In addition, the board of education shall not â

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discriminate because of race, religion, 🖭 national origin or handicap.

effective Ill. Reg. Amended at (Source:

Section 1.240 Equal Opportunities for all Students

opportunities in all education programs and services provided by the system (Section 10-20.12 of The the School Code). equal All students within a school district must be provided

- from a school because of color, race, or nationality (Section 10-22.5 of The the School Code). No school system may exclude or segregate any pupil a)
- a S taken and planned to prevent and eliminate segregation. The board of education shall submit periodic reports required by the State Board of Education detailing pupil attendance, faculty assignments, and actions q
- Each school district shall be in compliance with 23 Ill. Adm. Code 200 (Sex Equity). ΰ
- The board of education shall be in compliance with 23 Ill. Adm. Code 375 (Student Records). g
- become nonresidents during a school term shall not be charged tuition for the remainder of the term (Section 10-20.12a of The the School Code). The board of education shall charge tuition in an amount not exceeding 110% of the previous year's per capita cost, to nonresident students. Pupils who e
- The board of education shall loan textbooks to students whose parents are unable to buy them (Section 10-20.13 of The the School Code) and shall waive all fees for parents who are unable to afford them in accordance with a written policy adopted by the district under Section 1.245 of this Part f)
- bilingual education according to 23 Ill. Adm. Code 228 Any school district containing one or more attendance centers having students of limited English-speaking fluency shall establish a program in transitional (Transitional Bilingual Education). <u>б</u>
- education shall follow 23 Ill. Adm. Code 226 (Special The establishment and operation of all special Education). ਜ

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- Ill. Adm. Code 201 (Disadvantaged Students Funds Plan Districts Between 1,000 and 50,000 ADA). Bach school district whose Chapter 1 weighted average daily attendance (WADA) is between 1,000 and 50,000; shall annually file a plan with the State Board of Education. This plan must be in compliance with 23 ÷
- Each school district whose Chapter 1 weighted average daily attendance (WADA) is 50,000 or more; shall annually file a plan with the State Board of Education. This plan must be in compliance with 23 Ill. Adm. Code 202 (Disadvantaged Students Funds Plan - Districts over 50,000 ADA). Ĵ

THE INSTRUCTIONAL PROGRAM SUBPART D:

Ill. Reg.

Amended at

(Source:

Section 1.420 Basic Standards

- Class schedules shall be maintained in the administrative office in each attendance center of school district. a)
- Every school district shall have an organized plan for recording pupil progress and/or awarding credit; a plan which can be disseminated to other schools within the state. q
- Every school district shall: ์
- School Provide curricula and staff inservice training to elimination of discrimination and to enrich the community in achieving the stated objective of districts shall utilize the resources of the help eliminate unconstitutional and unlawful discrimination in our schools and society. instructional program. 7
- individuals and groups of different ages, sexes, races, national origins, religions, and sociowhich are designed to improve students' understanding of and their relationships with Include in its instructional program concepts economic backgrounds. 5
- Boards shall adopt and implement a policy for the distribution of teaching assignments, including study g

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hall and extra class duties and responsibilities.

- inservice programs for its professional staff. The staff shall be involved in planning, conducting, and Every school system shall conduct supervisory and evaluating supervisory and inservice programs. е е
- The School Code, in Sections 10-19 and 18-8, specifies certain measures relative to the school day. Any deviation from Section 18-8 of The the School Code will be examined on an individual basis by the State that every school system shall operate its schools so Superintendent of Education. Section 18-8 requires schoolwork each day with the following exceptions. as to provide a minimum of five clock-hours of

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Four clock-hours may be counted as a day of attendance for full-day kindergarten and firstgrade pupils. 7

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- WHERE A PUPIL ATTENDS SUCH A KINDERGARTEN FOR TWO HALF-DAYS ON ANY ONE SCHOOL DAY, SUCH PUPIL SHALL HAVE THE FOLLOWING DAY AS A DAY ABSENT FROM TWO OR MORE CLOCK-HOURS MAY BE COUNTED AS A HALF-KINDERGARTEN PROGRAMS. HOWEVER, SUCH KINDERGARTENS MAY COUNT TWO AND ONE-HALF DAYS OF ATTENDANCE IN ANY FIVE CONSECUTIVE SCHOOL DAYS. granted pursuant to the provisions of subsection SUPERINTENDENT OF EDUCATION. Approval will be SCHOOL, UNLESS THE SCHOOL SYSTEM OBTAINS DAY OF ATTENDANCE BY PUPILS IN HALF-DAY PERMISSION IN WRITING FROM THE STATE (f)(5)(A) of this Section. 6
- attendance for handicapped children below the age of six years who cannot attend a two-hour session One clock-hour may count as one half-day of because of handicap or immaturity. 3
- Q kindergarten in their fifth year and when the school district has determined through an assessment of their educational development that kindergarten attendance when such pupils entered Pupils may be counted for a second year of second year of kindergarten is warranted. 4
- Opening and Closing of School Term Approval of Days of Attendance of Four or More Clock-Hours 2

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- Education to the extent that the district has the school term, and upon the second or third day of the school term if the first and (Approval will be granted on the basis of the clock-hours on the opening and closing day of teachers' workshop. Four clock-hours may be counted as a day of attendance upon certification by the Regional Superintendent and approved by the State Superintendent of present facilities being inadequate to house second days are utilized as an institute or been forced to use daily multiple sessions. Days of attendance may be less than five a normal program.) a
- board of education minutes indicating board approval of the plan, shall include provision in class at least four clock-hours. Requests for extensions shall be made by the district prior to the opening of the school year to be for remedying the situation that caused the request, and shall include a daily schedule showing that each student will, in fact, be Approval to count a session of four to five Superintendent. The request shall be made shall include a copy of the official clock-hours as a day in session shall be granted by the State Superintendent of annually prior to the opening of school. Education upon certification of the district's plans by the Regional used,
- day used reduces the number of allowable half-days have prior approval on forms supplied by the State remainder of the day is utilized for an inservice training program for teachers. Two full days may be used for parent-teacher conferences. Any full maximum of five half-days per school year may be by two. In either instance, the programs shall A session of three or more clock-hours up to a counted as a full day of attendance when the Board of Education.

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- conducted a legal school day, which is eligible to be counted for state aid, when the following A school district shall be considered to have conditions are met during a work stoppage. ~
- Fifty percent or more of the district's A)

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recent full month of attendance prior to the students are in attendance, based on the average daily attendance during the most work stoppage.

- Educational programs are available at all grade levels in the district, in accordance with the minimum standards set forth in this Part. B
- All teachers must hold certificates which are certification appropriate to the grade level employment. Other than substitute teachers, and subject area(s) of instruction must be registered with the Educational Service Region Superintendent for their county of held by all teachers. ົວ
- Any deviation from the five clock-hour requirement as it pertains to student attendance will be evaluated on an individual basis by the State Superintendent of Education, 8

Length of School Term <u>a</u>

- actual pupil attendance, computable under Section 18-8 of The the School Code. Any days allowed by law for a teachers' institute but not used as such or used as parental institutes as provided in school term beyond such a closing date unless that extension of term is necessary to provide the Each school board shall annually prepare a calendar for the school term, specifying the opening and closing dates and providing a minimum term of at least 185 days to ensure 176 days of increase the minimum term by the school days not so used. Except as provided in Section 10-19.1 of The the School Code, the board may not extend the such necessary extension, school employees shall be paid for such additional time on the basis of their regular contracts. A school board may specify a closing date earlier than that set on In case of district have provided the minimum number of the annual calendar when the schools of the Section 10-22.18d of the School Code shall minimum number of computable days. computable days under this section. 7
- Nothing in this section prevents the board from 5

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and other nonteaching personnel for a period of 12 proportionate to that received for comparable work during the school term (Section 10-19 of The the employing superintendents of schools, principals, months, or in the case of superintendents for a period in accordance with Section 10-23.8 of The employing other personnel before or after the the School Code, or prevents the board from regular school term with payment of salary School Code).

- Local boards of education shall establish and maintain Kindergartens for the instruction of children (Sections 10-20.19a, and 10-22.18 of The the School Code). P
- must also provide a half-day kindergarten for those students whose parents or guardians request School districts may establish a kindergarten of either half-day or full-day duration. If the district establishes a full-day kindergarten, it a half-day program. 7
- must schedule half-day classes, separate and apart from full-day classes, for those children. If school district which establishes a full-day there are fewer than 20 children whose parents request a half-day program, such students may be enrolled in either the morning or afternoon parents request a half-day program, the district kindergarten also has 20 or more students whose session of a full-day program provided that the following conditions are met. If a 5
- available to parents to assist the parents in Distinctive curriculum plans for the half-day selecting the appropriate program for their and full-day kindergarten programs must be child, and maintained in district files. developed by the school district, made æ
- A common core of developmental, readiness and academic activities must be made available to regardless of the amount of time they attend all kindergarten students in the district â
- All support services (e.g. health counseling and transportation) provided by the district ΰ

must be equally available to full-day and half-day students.

i) Career Education

- The educational system shall provide every-student students with opportunities to prepare themselves for entry into the world of work.
- Every district shall initiate a Career Awareness and Exploration Program which should enable students to make more meaningful and informed career decisions. This program should be available at all grade levels.

j) Co-Curricular Activities

- Programs for extra classroom activities shall provide opportunities for all students.
- The desires of the student body in the area of cocurricular activities shall be of critical importance. At all times, activities of this nature shall be carefully supervised by a schoolapproved sponsor.

k) Consumer Education and Protection

- 1) A program in consumer education may include the following topics: the individual consumer in the marketplace, money management, consumer credit, human services-housing, food, transportation, clothing, health services, drugs and cosmetics, recreation, furnishings and appliances, insurance, savings and investments, taxes, and the consumer in our economy.
- district shall maintain evidence which shows that each student has received adequate instruction in consumer education or has demonstrated proficiency by passing the Consumer Education Proficiency Test as required by law (#HHT-Rev--Statt--1989;-eh--122; per- Section 27-12.1 of the School Code) prior to the completion of the 12th grade. Consumer education may be included in course content of other courses, or it may be taught as a separate required course.

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- The minimal time allocation shall not be less than nine weeks or the equivalent for grades 9-12 and shall include installment purchasing, budgeting, comparison of prices and an understanding of the roles of consumers interacting with agriculture, business, trade unions, and government in formulating and achieving the goals of the mixed free enterprise system.
- 4) Each district may use as a guideline the information set forth in "Consumer Education in Illinois Schools" issued by the State Board of Education.
- 5) Teachers instructing in consumer education courses shall have proper certification for the position to which they are assigned with at least three semester hours in consumer education courses.

Conservation of Natural Resources

- IN EVERY PUBLIC SCHOOL DISTRICT THERE SHALL BE INSTRUCTION, STUDY AND DISCUSSION OF CURRENT PROBLEMS AND NEEDS IN THE CONSERVATION OF NATURAL RESOURCES, INCLUDING, BUT NOT LIMITED TO, AIR POLLUTION, WATER POLLUTION, WASTER REDUCTION AND RECYCLING, THE EFFECT OF EXCESSIVE USE OF PESTICIDES, PRESERVATION OF WILDERNESS AREAS, FOREST MANAGEMENT, PROTECTION OF WILDLIFE, AND HUMANE CARE OF DOMESTIC ANIMALS. (Section 27-13.1 of The the School Code).
- 2) It is recommended that the study of conservation also include energy demands, population growth and distribution, food production, transportation systems, solid waste disposal, and noise abatement.
- Every school district has the responsibility to prepare students for full citizenship. To this end each school district should encourage student discussion and communication in areas of local, state, national and international concern.

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n) Health Education

Each school system shall be in compliance with 23 Ill. Adm. Code 253 (Comprehensive Health Education) issued pursuant to the Critical Health Problems and

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Comprehensive Health Education Act (Ill. Rev. Stat. 1989, ch. 122, par. 861 et seq.).

- 1) There is no specific time requirement for grades K-6; however, health education shall be a part of the formal regular instructional program at each grade level.
- The minimal time allocation shall not be less than one semester or equivalent during the middle or junior high experience.

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3) The minimal time allocation shall not be less than one semester or equivalent during the secondary school experience.

o) Media Programs

Each attendance center shall provide a program of mediservices to meet the curricular and instructional need of the school. The "Recommended Standards for Educational Library Media Programs" (Revised 1986) is suggested as a guide for program development.

p) Physical Education

- 1) Appropriate activity related to physical education shall be required of all students each day (The School Code).
 The time schedule shall compare favorably with other courses in the curriculum. Safety education as it relates to the physical education program should be incorporated.
- There shall be a definite school policy regarding credit earned each semester in physical education with provisions for allowable variables in special cases.
- If a district determines that it is difficult to implement a program of physical education which involves all students daily, the administration should consult one of the program service personnel from the State Board of Education for assistance in the development of an acceptable program.
- 4) THE PHYSICAL EDUCATION AND TRAINING COURSE OFFERED IN GRADES 9 AND 10 MAY INCLUDE HEALTH EDUCATION.

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(Section 27-5 of The the School Code)

- SPECIAL ACTIVITIES IN PHYSICAL EDUCATION SHALL BE PROVIDED FOR PUPILS WHOSE PHYSICAL OR EMOTIONAL CONDITION, AS DETERMINED BY A PERSON LICENSED UNDER THE MEDICAL PRACTICE ACT (ILL. REV. STAT. 1989, CH. 111, PAR. 4401 ET SEQ.), PREVENTS THEIR PARTICIPATION IN THE COURSES PROVIDED FOR NORMAL CHILDREN: [Section 27-6 of The Lie School Code].
- Each school board which chooses to excuse pupils enrolled in grades 11 and 12 from engaging in physical education courses as provided in Section 27-6(b) of The the School Code (HHT-Rev-Stat-19897-eh-1287-par-27-6(b) shall establish a policy to excuse pupils on an individual basis and shall have such policy on file in the local district office. The district shall maintain records showing that, in disposing of each request to be excused from physical education, the district applied the criteria set forth in Section 27-6 to the student's individual circumstances (i.e., plans for postsecondary education, participation in interscholastic sports, or enrollment in a class required for graduation).

q) Pupil Personnel Services

To assure provision of Pupil Personnel Services, the local district shall conduct a comprehensive needs assessment to determine the scope of the needs in the areas of:

- .) Guidance and Counseling Needs;
- 2) Psychological Needs;
- 3) Social Work Needs;
- 4) Health Needs.

r) Social Studies and History

Each school system shall provide history and social studies courses which do the following: analyze-the principles-of-representative-government;-the constitutions-of-both-the-United-States-and-the-State of-Illinois;-the-proper-use-of-the-fiag;-and-how-these concepts-have-related-and-presently-do-relate-in-actual

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country-and-the-state;-and-the-role-of-labor-unions-and 21-of-The-School-Code).--The-course-of-study-shall-also include-the-study-of-the-period-in-world-history-known practice-in-our-world---The-teaching-of-history-of-the goals-of-a-mixed-free-enterprise-system.--{Section-27contributions-of-ethnic-groups-in-the-history-of-this United-States-shall-include-a-study-of-the-role-and their-interaction-with-government-in-achieving-the as-the-Holocaust---(Section-27-20-9-of-The-School eede++

- and currently do relate in actual practice in our dovernment, the Constitutions of both the United States and the State of Illinois, the proper use of the flag, and how these concepts have related world (Section 27-21 of the School Code); analyze the principles of representative 7
- include in the teaching of United States history the role and contributions of ethnic groups in the history of this country and the state (Section 27-21 of the School Code); 2
- with government in achieving the goals of a mixed include in the teaching of United States history the role of labor unions and their interaction free-enterprise system (Section 27-21 of the School Code); 쉬
- include the study of that period in world history known as the Holocaust (Section 27-20.3 of the School Code); 4
- ncluding the individual contributions of Africaninclude the study of the events of Black history, strungles (Section 27-20.4 of the School Code); Americans and their collective socio-economic 3
- in America, including individual contributions and include the study of the events of women's history women's struggles for the right to vote and for equal treatment (Section 27-20.5 of the School ಠ
- all students, teachers, and visitors when participating in or observing dangerous vocational arts and chemical-physical courses of laboratories. (Section 698.11 of Protective eye devices shall be provided to and worn by ŝ

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The the School Code) +

- SUCH REQUIRED INSTRUCTION, STUDY AND DISCUSSION MAY BE INCLUDED IN THE COURSES OF STUDY REGULARLY TAUGHT IN THE SCHOOLS. IN GRADES KINDERGARTEN THROUGH 8, SUCH REQUIRED INSTRUCTION MUST BE GIVEN EACH YEAR TO ALL PUPILS IN THOSE GRADES (Section 27-13.2 of The Libert Course of The Li PUPILS MAY RECOGNIZE THE DANGER OF AND AVOID ABDUCTION STUDY AND DISCUSSION OF EFFECTIVE METHODS BY WHICH IN EVERY PUBLIC SCHOOL THERE SHALL BE INSTRUCTION School (
- TO THE PREVENTION OF ABUSE OF ANABOLIC STERFOBS STEROIDS IN GRADES 7 THROUGH 12 AND SHALL INCLUDE SUCH SCHOOL DISTRICTS SHALL PROVIDE INSTRUCTION IN RELATION INSTRUCTION SHALL EMPHASIZE THAT THE USE OF ANABOLIC SPERFIÐBS STEROIDS PRESENTS A SERIOUS HEALTH HAZARD TO PERSONS WHO USE SPERFIÐBS STEROIDS TO ENHANCE ATHLETIC PERFORMANCE OF OR PHYSICAL DEVELOPMENT. (Section 27-23.3 of The Lie School Code). INSTRUCTION IN SCIENCE, HEALTH, DRUG ABUSE, PHYSICAL EDUCATION OR OTHER APPROPRIATE COURSES OF STUDY. â

_, effective Amended at __ Ill. Reg. (Source:

Section 1.440 Additional Criteria for High Schools

- including the following as a minimum program of offerings. The time allotment, unless specified by The School Code or regulations, is the option of the local school district. The district shall provide a comprehensive curriculum a)
- Language Arts, three units 7
- Science 5
- Mathematics 3
- History of the United States, one unit 4
- Foreign Language
- Music 9
- Art 7
- Career Education -- Orientation and Preparation 8

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- 9) Health Education, students must take one semester or equivalent, i.e., at least eighteen weeks, during the secondary school experience.
- 10) Physical Education, daily except as provided in subsection (a)(9) of this Section (Section 27-6 of **The the School Code)**.
- or squivalent, grades 10-12 except for students who have demonstrated proficiency pursuant to the provisions of Section 27-12.1 of The Lie School Code and Section 1.462 of this Part.
- 12) Conservation of Natural Resources (Section 27-13.1 of The the School Code).
- 13) Driver and Safety Education, 30 clock-hours of classroom instruction and 6 clock-hours of behind the wheel--grades 10, 11, and 12 (Section 27-23 of **The** the School Code).
- 14) Vocational Education--Job Entry Skill Development
- b) The daily program should be organized so as to afford each student easy access to the instructional materials center, the counselor, program of extracurricular activities, and teacher-student conferences.
- c) No teacher should have more than five different preparations.
- d) Each teacher should have time to conduct student conferences and plan for instructional programs.
- e) Driver Education and Safety
- 1) School districts maintaining grades 9-12 shall provide instruction in compliance with Sections 27-23 and 27-24 of The the School Code and 23 Ill. Adm. Code 252 (Driver Education).
- Such a course shall consist of at least 30 clock-hours of classroom instruction and at least six clock-hours of practice driving in a dual control car. Eight clock-hours of instruction on a multiple car range may be allowed in lieu of four clock-hours of instruction in a dual control car,

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and twelve clock-hours of instruction in driving simulators may be allowed in lieu of three clock-hours of instruction in a dual control car if prior approval is obtained.

- 3) Strong emphasis shall be provided to establish and promote essential knowledge, correct habits, fundamental skills, proper attitudes, and a sound understanding of the rules and laws necessary for safe driving.
- 4) Such a driver education course may include classroom instruction on the safety rules and operation of motorcycles or motor-driven cycles.
- Specific minimum requirements for graduation applicable to-students-who-entered-the-9th-grade-prior-to Beptember-1984 are listed below.

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- 1) 16 units in grades 9-12 if a four-year school and 12 units in grades 10-12 if a three-year high
- In either of the above, one unit shall be in American History or American History and Government. In a four-year high school, three units shall be in Language Arts and, in a three-year high school, two units shall be in Language Arts. In either instance emphasis shall be on reading and writing skills while one-half unit may be in oral communication.
- American patriotism and the principles of representative government, as enunciated in the American Declaration of Independence, the Constitution of the United States of America and the Constitution of the State of Illinois, and the proper use and display of the American flag, shall be taught in all public schools. Not less than one hour per week, or the equivalent, shall be devoted to advanced study of this subject (Sections 27-3 and 27-4 of Phe the School Code). No student shall receive certification of graduation without passing a satisfactory examination upon such subjects.
- 4) In-addition-to-the-foregoing,-all-graduates-are required-by-law-to-have-had-adequate-instruction in-honesty,-justice,-moral-courage,-humane

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education,-safety-education,-and-others-mandated in-Section-27-15-of-The-School-Coder

g g

- Pursuant to Ill. Rev. Stat. 1989, ch. 122, par. 27-22, students who enter the 9th grade in-September-1984,-and thereafter, except handicapped students whose course of diploma in addition to the applicable requirements of program, must successfully complete the following courses as a prerequisite to receiving a high school subsection (f) above and any requirements imposed by study is determined by an individualized education the local school district.
- THREE YEARS OF LANGUAGE ARTS; 7
- TWO YEARS OF MATHEMATICS, ONE OF WHICH MAY BE RELATED TO COMPUTER TECHNOLOGY; 6
- ONE YEAR OF SCIENCE; 3
- TWO YEARS OF SOCIAL STUDIES, OF WHICH AT LEAST ONE YEAR MUST BE HISTORY OF THE UNITED STATES OR A COMBINATION OF HISTORY OF THE UNITED STATES AND AMERICAN GOVERNMENT; AND 4
- ONE YEAR CHOSEN FROM 2
- MUSIC, A)
- ART, B
- FOREIGN LANGUAGE, WHICH SHALL INCLUDE AMERICAN SIGN LANGUAGE, ΰ
- VOCATIONAL EDUCATION. â
- requirements set forth in subsection (g), provided that its description shows that its principal instructional activity is the development and application of knowledge and skills related to the applicable district office a description of all course offerings that may comply with the requirements of the law. A course will be accepted as meeting the graduation School districts shall have on file in the local Э
- administration to provide parents and guardians timely It is the responsibility of the school district's and periodic information concerning graduation Ę

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where a student's eligibility for graduation may be in requirements for all students, particularly in cases question.

- by local boards of education. Boards of education may accept courses completed in a community college toward Additional requirements for graduation may be adopted graduation. ÷
- , effective Ill. Reg. Amended at (Source:

STAFF QUALIFICATIONS SUBPART G:

Section 1.720 Minimum Requirements for Teachers of Junior High and Departmentalized Upper Elementary Grades

- 18 semester hours in the area of major teaching assignment, including at least 5 semester hours in each course where subject matter areas are divided into two or more specific courses. This requirement also applies to teachers of the 6th, 7th, and/or 8th grade where the organizational pattern is a junior high or When departmentalized in part, the instructional pattern is in part or entirely requirement only applies to the departmentalized departmentalized. a
- All teachers (except those employed prior to September 1, 1973) assigned departmentalized responsibility shall meet the 18-semester-hour requirement. This regulation applies only to the subject area which comprises more than 50% of the instructional periods assigned to a Q
- coursework which must be included among the 18 semester hours to be earned. These requirements are set forth under the relevant subject matter heading in Section 1.730 and supersede those contained in subsection (a) In some subject matter areas there is specific 히

, effective Amended at __ Ill. Reg. (Source:

Section 1.730 Minimum Requirements for Secondary Teachers a Specified Subject Area Teachers in Grades Six (6) and Above

teachers in the respective subject matter area, unless specific requirements for teachers in grades 6 through 8 are set forth. Each subsection of this Section applies only to secondary

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Agriculture (Grades 9 through 12)

a)

The requirements set forth in this subsection (a) shall remain in force through June 30, 1991. Thereafter, the requirements set forth in Section 1.735(a) shall take effect.

24 hours in the field, including an appropriate distribution in the following areas, plus preparation in the specific course taught.

7

- A) Agricultural Production
- B) Agricultural Mechanics
- C) Agricultural Supplies, Services and Products
- D) Horticulture
- E) Agricultural Resources and Forestry
- If special courses are taught in this field, 8 semester hours are required for each course taught.

b) Art (Grades 9 through 12)

24 semester hours in the field, including an appropriate distribution in:

- Painting, drawing, printmaking
- 2) Sketching, lettering, jewelry, design, silkscreen
- 3) Pottery and sculpture
- 4) Constructional design
- 5) Art education
- 6) History and appreciation of art
- c) Aviation-Aerospace Education (Grades 9 through 12)
- General Aviation and/or Aerospace Education
- A) Completion of an approved aerospace education workshop course. 5 hours of flight

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orientation or familiarization within the last five years. This flight experience does not necessarily need to be as a member of a flight crew.

- b) If the material that is being taught is strictly sociological in nature, the flight orientation requirement may be minimal. If the material that is being taught emphasizes astroscience, the teacher should have at least one college course in astronomy.
- Aviation Science Course

5

- A) (Based upon a preflight course leading to completion of the FAA private pilot's written examination.)
- A valid FAA private pilot's license or higher, or a valid FAA ground school instructor's certificate and 10 hours of flight orientation or familiarization in the general aviation category aircraft within the last five years. This flight experience does not necessarily need to be as a member of a flight crew.
- d) Business Education (Grades 9 through 12)
- 1) The requirements set forth in this subsection (d) shall remain in force through June 30, 1991.
 Thereafter, the requirements set forth in Section 1.735(b) shall take effect.
- 2) 24 semester hours in the field, which shall include a specialized methods course with the following minimum qualifications for the subject matter areas or course taught:
- Typing

æ

6 semester hours, or a statement of equivalency from the institution granting the degree, or the completion of the terminal course in the typewriting sequence.

- B) Shorthand and Transcription
- semester hours, or a statement of

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equivalency from the institution granting degree, or the completion of the terminal course in the shorthand-transcription sequence.

Bookkeeping, accounting, record keeping ົວ

in data processing, or a statement of equivalency from the institution granting the 6 semester hours in accounting and a course

Business law 3 semester hours of business law.

Distributive subjects; i.e. marketing, retailing, distributive education 臼

8 semester hours covering at least two of the following: sales, retailing, advertising, principles of marketing.

Business arithmetic Ē

ဖ 2 semester hours in business mathematics or semester hours in accounting.

Office practice, secretarial practice, clerical practice, or office machines ত

2 semester hours in coursework which includes following is part of the course: typewriting, qualifications for teaching whichever of the the operation of the office machines taught shorthand, bookkeeping (see subsections $\{d\}$ $\{4\}$ $\{2\}$ $\{-2\}$ $\{2\}$ $\{-2\}$ $\{4\}$ in the secondary school course and above).

introduction to business, business principles Basic business, general business, Ħ

business marketing, management, or a methods semester hours of economics and at least 4 semester hours in any two of the following 3 semester hours of consumer education; 3 areas: business law, introduction to of teaching basic business.

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Business English Ĥ

2 semester hours in business English, business correspondence, business communications, or business writing.

Business economics 5

finance, financial management, or marketing including at least one course in principles 8 semester hours in the area of economics, of economics.

Data processing X

5 semester hours in data processing or the equivalent.

Language Arts--English (Grades 9 through 12) е

hours in rhetoric and composition and not more than 8 semester hours in speech and journalism. To teach grammar, American Literature, English Literature, reading or dramatics, the English teacher must have one 24 semester hours in the field, including 6 semester course in the subject.

Journalism (Grades 9 through 12) ()

8 semester hours in journalism and 16 semester hours in English, or 18 semester hours in journalism and 6 semester hours in rhetoric and composition.

Speech (Grades 9 through 12) <u>6</u>

8 semester hours in speech selected from at least three of the following four areas: public speaking, interpersonal communication, oral interpretation, and group discussion; and 16 semester hours in English or 18 semester hours in speech, selected from the four areas listed above, and 6 semester hours in rhetoric and composition.

Foreign Language (Grades 9 through 12) я 2

20 semester hours in the language.

No credit may be allowed for high school language,

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ç unless such credit is approved by an institution of higher learning, and it is noted on the official transcript, in which case I semester hour may be allowed for each unit of high school language, not exceed 4 semester hours.

Health Education (Grades 9 through 12)

į.

Thereafter, the The requirements described in this subsection (i) shall requirements set forth in Section 1.736(a) shall take remain in force through June 30, 1994. effect.

- 20 semester hours in the field 7
- -- One course Required Health Education Component -- One cours from each of the following areas to total 10-14 semester hours: 5
- Advanced Concepts of Health

B

- Programs in School Health B
- Programs in Community Health ົວ
- Curriculum Development and Evaluation in Health Education â
- course from at least three of the following areas Additional Health Education Components -- One to total 6-10 semester hours: 3
- The Growing and Developing Organism A
- **Ecological Relationships** a
- Disease Control ΰ
- Human Sexuality and Family Life
- Patterns Eating Food Practices and 亩
- Consumer Health Sources and Resources Ē
- Safety Θ
- Mood-Modifying Substances Ŧ
- Personal Health Practices Ĥ

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Mental-Emotional Health 5

Health Occupations (Grades 9 through 12) ÷ The requirements set forth in this subsection (j) shall remain in force through June 30, 1991. Thereafter, the requirements set forth in Section 1.735(c) shall take

- 24 semester hours in a health occupations specialty (e.g. medical laboratory, nursing, radiologic technology, inhalation therapy) î
- program in a specific health field with a minimum of 2,000 hours of post-graduate practical work experience in the health specialty in which Graduation from an approved technical-level trained, 5
- Shall be certified, licensed or registered in the health occupations specialty 3
- Home Economics Education (Grades 9 through 12) $\mathbf{\hat{z}}$

The requirements set forth in this subsection (k) shall remain in force through June 30, 1991. Thereafter, the requirements set forth in Section 1.735(d) shall take

including work in 24 semester hours in the field, including work in some of the following areas, plus preparation in the specific teaching area.

7

- Human Development (includes prenatal, child, adolescent and adult development and care) A
- Interpersonal and Family Relationships B
- Consumer Education and Home Management ΰ
- Nutrition and Food 6
- Housing, Home Furnishings and Equipment 臼
- Clothing and Textiles Ē
- areas, 8 semester hours are required in the area To teach a special course in any of the above 7

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to be taught.

Industrial Arts (Grades 9 through 12) 7

The requirements set forth in this subsection (1) shall remain in force through June 30, 1991. Thereafter, the requirements set forth in Section 1.735(e) shall take

- 24 semester hours in the field, including work in each shop subject to be taught. 7
- To teach a unit shop, the teacher shall have semester hours in the subject taught. <u>~</u>
- Mathematics Ê
- In grades 9-12 ਜ
- 25 semester hours in the field, including:
- a minimum of 8 semester hours from calculus æ
- teaching of secondary school mathematics; and 3 semester hours of coursework in the B
- 14 semester hours of work from at least four of the following areas: ົວ
- Computer Science į.
- Linear Algebra ii)
 - iii) Modern Algebra
- Geometry iv)
- Applied mathematics 5
- Probability and statistics vi)
- vii) History of mathematics
- In grades 6-8 5
- 18 semester hours in the field including:
- 3 semester hours in the methods of teaching mathematics in grades 6-8 æ

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- semester hours to be selected from four of the following areas: â
- Math content courses for elementary teachers Ţ
- Calculus 11)
- iii) Modern algebra or number theory
- Geometry iv)
- Computer Science 5
- Probability and statistics vi)
- vii) History of mathematics
- The requirements of Section 1.730 (m) are not applicable to personnel employed prior to September 1, 1985. 3
- Music (Grades 9 through 12) 급
- Vocal 7
- 24 semester hours in the field, including:
- Applied vocal music B
- Music theory â
- Conducting ົວ
- History of music â
- Methods and materials for general school vocal music (E
- Music--Instrumental 5
- 24 semester hours in the field, including:
- Applied instrumental music a
- Music theory â
- Conducting ົວ

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- Methods and materials for general school instrumental music 6
- These standards do not apply to those individuals employed prior to September 1, 1978. 3
- Physical Education (Grades 9 through 12) ô

The requirements described in this subsection (o) shall remain in force through June 30, 1994. Thereafter, the requirements set forth in Section 1.736(b) shall take effect.

- semester hours in the field which shall include 20 semester hor the following: 7
- be selected from at least 5 semester hours to two of these areas: æ
- Anatomy ÷.
- Physiology ii)
- iii) Kinesiology
- Physiology of exercise iv)
- three areas below One course from each of the to total 5 semester hours: B)
- Dance and/or rhythmic activities ,
- Individual-dual activities 11)
- iii) Team sports
- least three of the four areas listed below: 10 semester hours to be selected from at ΰ
- Instructional methods for physical education į.
- Curriculum design for physical education 11)
- Physical Education for the atypical child (optional, but strongly recommended) iii)

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- school (required for elementary school; optional, but strongly recommended for secondary school) Physical education for the elementary iv)
- This standard does not apply to those individuals employed prior to September 1, 1978. 5
- Psychology--20-semester-hours-in-the-field Psychology (Grades 9 through 12) a

20 semester hours in the field

Safety-and-Briver-Education--16-semester-hours-in-the f≠eld,-ineluding-preparation-as-follows: Safety and Driver Education (Grades 9 through 12) ਰ

16 semester hours in the field, including preparation as follows:

- 3 semester hours in general safety 7
- semester hours in driver education and advanced traffic safety ß 7
- semester hours chosen from two or more of the following areas: œ 3
- General safety, including traffic and industrial safety æ
- Advanced psychology and sociology a
- First aid and health education ပ
- Instructional materials â
- ø of in multiple-car programs shall have preparation the use of these methods which shall consist minimum of 1 semester hour or its equivalent Teachers assigned to either simulation or each area. 4
- inciuding-the-semester-hours-indicated-in-the-subject Seience,-Biological--24-semester-hours-in-the-field, Science, Biological (Grades 9 through 12) to-be-taught 'n

24 semester hours in the field, including the semester

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hours indicated in the subject to be taught

Biology

a

8 semester hours in botany including 5 semester hours in laboratory work, 8 semester hours in zoology including 5 semester hours in laboratory work. 10 semester hours laboratory work in biology satisfies the laboratory requirement.

2) Botany

8 semester hours including 5 semester hours in laboratory work.

Physiology

3

8 semester hours

4) Zoology

8 semester hours in zoology including 5 semester hours in laboratory work.

s) Seience;-Physica!--24-semester-hours-in-the-field; including-the-semester-hours-indicated-in-the-subject to-be-taught:

Science, Physical (Grades 9 through 12)

24 semester hours in the field, including the semester hours indicated in the subject to be taught:

- Astronomy--5 semester hours
- 2) Chemistry--10 semester hours including 4 semester hours in laboratory work
- 3) Geology--8 semester hours
- 4) Physics--10 semester hours including 4 semester hours in laboratory work
- 5) Physiography -- 5 semester hours
- 6) Aerospace -- 5 semester hours
- 7) Earth science -- 8 semester hours
- 8) In astronomy, geology, and earth science, it is

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recommended that field experiences be included as part of the hourly requirements. In addition, it is recommended that a teacher of astronomy, chemistry, or physics have the minimum preparation required of a mathematics teacher.

t) Beienee_General--24-semester-hours-in-the-field including: Science, General (Grades 9 through 12)

24 semester hours in the field including:

- 1) Physical science--8 semester hours
- 2) Biological science--8 semester hours
- u) Social-Studies--24-semester-hours-in-the-field, including-the-semester-hours-indicated-in-each-subject to-be-taught:

Social Studies (Grades 9 through 12)

24 semester hours in the field, including the semester hours indicated in each subject to be taught:

- 1) United States History--8 semester hours
- 2) Civics, Political Science--8 semester hours
- 3) Economics--8 semester hours
- 4) Geography--8 semester hours
- 5) Sociology--8 semester hours
- 6) World History--8 semester hours in World History, 5 semester hours in U.S. History
- 7) Anthropology--5 semester hours
- 8) Every history teacher shall have 16 semester hours in history.

v) Vocational-Education-(Reimbursable-Training-Programs)--Vocational Education (Reimbursable Training Programs, Grades 9 through 12)

All instructional personnel and coordinators shall hold a valid teaching certificate. The requirements set forth in this subsection (v) shall remain in force

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through June 30, 1991. Thereafter, the requirements set forth in Section 1.735(f) shall take effect.

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- in the five areas of Industrial-Oriented, Applied Instructional Personnel--The requirements for instructional personnel in reimbursable programs Health Occupations, and Business, Marketing and Biological and Agricultural, Home Economics, Management are:
- A minimum of 2,000 hours of employment experiences in the occupational specialty to be taught. A
- by: 2,000 hours of employment experience in the occupational specialty to be taught or a combination of work experience and directed paragraph must be submitted in detail in the does not meet the provisions of subsection four (4) years from the date of employment occupational experience. Options of this experience requirement will be met within The district may employ an individual who occupational education and are subject to (v) (1) (A), providing the employment district's One and Five Year Plan for approval. B
- For those occupations in which employment or preparation is regulated by law or licensure, compliance with those laws is mandated. ົວ
- Cooperative Teacher Coordinator 5

Professional competencies for specialized cooperative occupational education:

Occupational Education A)

cooperative education in any one of the Teacher-coordinators of specialized following areas:

- Agriculture and Agri-Business į.
- Business and Office
- iii) Distributive Education

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- Health Occupations iv)
- Home Economics and Related Occupations 5
- Industrial Oriented Occupations Cooperative Work Training vi)
- submitted in detail in the district's One and Five Year Plan for occupational education and The 16 semester hours in the field, which shall include a methods course in the occupational minimum of: 2,000 hours of employment experience in the occupational specialty to requirement within four (4) years from date To be approved, an individual shall possess combination of employment experience and directed occupational experience equivalent of initial employment as a coordinator. The latter two of these three options shall be occupational experience in the appropriate hour employment requirement, or complete a education, coordination in techniques, and administration of cooperative occupational addition, the coordinator shall possess a individualized instructional methodology. specialized area; in addition, 6 semester hours in the area of organization and specialized area, equivalent to the 2,000 to the 2,000 hour employment experience be taught, or complete a directed are subject to approval. (A

Special Needs Cooperative Teacher Coordinator 3

coordinators as shown in subsection (v)(2) (except that the 16 semester hours in occupational Experience and Career Exploration Program, the specialized cooperative occupational education In schools with cooperative courses to serve coordinator shall meet the requirements for students with special needs, such as Work education shall be waived).

Interrelated Cooperative Occupational Teacher Coordinator 4

Coordinators of interrelated cooperative education shall meet certification standards in at least one of the occupation areas listed above and meet the

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requirement of subsection (v)(2)

5) Compliance with Legal, Governmental and Professional Requirements For those occupations in which employment or preparation is regulated by law or licensure, compliance with those laws is required.

 The requirements of subsection (v) are not applicable to personnel employed prior to September 1, 1978.

ource: Amended at __ Ill. Reg. ___, effective __

Section 1.735 Requirements to Take Effect on July 1, 1991

The requirements of this Section shall apply only to personnel employed on or after July 1, 1991. For the purposes of this Section, the term "upper-division level" refers to coursework normally offered to students by postsecondary educational institutions during their junior or senior year. The term "preparation level" means courses usually taught during the junior or senior year of high school.

- a) Agricultural Education (Grades 9 through 12)
- Twenty-four (24) semester hours, to include:
- A) A vocational/occupational education methods course at the upper-division level.
- B) Twelve (12) semester hours, including at least one course in each of the following areas:
- i) Agricultural Exploration/Orientation agricultural careers, supervised
 occupational experience programs, adult
 education in agriculture, agricultural
 leadership;
- ii) Agricultural Entrepreneurship agricultural merchandising, agricultural
 business procedures, agricultural
 economics, computer applications in
 agriculture;
- iii) Agricultural Natural Sciences animal

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science, plant science, soil science;

- iv) Agricultural Physical
 Science/Mechanization servicing small
 engines, surveying, electrical wiring,
 building agricultural structures.
- C) A minimum of one concentration (9 semester hours in addition to the 12 semester hours listed in subsection (a)(1)(B)) in one of the following endorsement areas:
- agricultural Business and Management agricultural commodity and product
 marketing, financing agricultural
 businesses, agricultural business
 management, computerization in
 agriculture, producing, processing,
 products;
- ii) Agricultural Power and Machinery gasoline and diesel power units, field
 machinery, electric motors and controls,
 hydraulic systems, power transmission
 systems;
- iii) Horticulture floriculture, vegetable
 and fruit production, landscaping and
 turf management, nursery and greenhouse
 operation and management; or
- iv) Agricultural Resources agricultural
 conservation, recreation management,
 forestry production and management, game
 and wildlife management.
- To provide instruction at the preparation level, teachers must hold an endorsement that corresponds to their area of instruction.
- In vocational education reimbursable programs, instructors teaching preparation-level courses must have a total of 2,000 hours of work experience in the specific endorsement area being taught. If an instructor teaches in more than one endorsement area, the 2,000 hours shall be distributed among endorsement areas being taught, with a minimum of 250 hours work experience in

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supervisors are no longer available to verify the employment, affidavits by applicants' instructors stating the facts concerning the work experience employment who can be reached for verification of the documentation submitted, or, in cases where Records must be kept by the employing institution to substantiate this experience. Such records may include written experience. Such records may include wr statements from supervisors at places of each endorsement area. in question.

- Business, Marketing, and Management <u>Grades 9 through</u> 12) Q
- Twenty-four (24) semester hours, to include: 7
- A vocational/occupational education methods course at the upper-division level. A A
- Twelve (12) semester hours, including at least one course in each of the following areas: B)
- business management, survey of business, business and its environment, business Business Exploration/Orientation principles; .
- processing, management information microcomputer applications, data Business Computer Applications systems, introduction to data processing/computers; ii)
- Business Communications business business report writing, business English, business communications, correspondence; iii)
- or mathematics for business, statistics one (1) year of college mathematics. Business Mathematics - quantitative methods of business, finance, ;<u>`</u>
- listed in subsection (b)(1)(B)) in one of the hours in addition to the 12 semester hours one concentration (9 semester following endorsement areas: A minimum of ΰ

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- accounting, managerial accounting, or finance, with one course in the upper Accounting - accounting, financial division; <u>;</u>
- entrepreneurship, consumer education or upper-division course(s) in management Basic Business - economics, survey of business, business law, and/or marketing; ii)
- applications, introduction to computers, including the terminal course in the sequence, and one upper-division course Information Processing - microcomputer in office administration/information word processing and/or typewriting management; iii)
- microcomputer applications, introduction to computers including one upperprocessing and/or typewriting sequence and the terminal course in a shorthand administration/information management, Information Processing/Secretarial the terminal course in the word division course in office system; iv)
- Business Computer Programming/Systems analysis, including one upper-division systems analysis, or business computer management information system (MIS), microcomputer applications, systems business computer programming, programming course; or 5
- Marketing upper-division courses in advertising, sales, retailing, marketing, wholesaling, consumer behavior, entrepreneurship. vi)
- subject areas in Business, Marketing and Management Occupations. To provide instruction in Business, Marketing and Management teachers who hold a Business, Marketing and Management endorsement may teach an orientation/exploratory composite course which addresses a variety of specific subject, teachers must hold the

5

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endorsement that corresponds to the area of instruction, as identified in subsection

<u>e</u>

experience in the specific endorsement area being taught. If an instructor teaches in more than one endorsement area, the 2,000 hours shall be supervisors are no longer available to verify the employment, affidavits by applicants' instructors stating the facts concerning the work experience distributed among endorsement areas being taught, with a minimum of 250 hours work experience in employment who can be reached for verification of the documentation submitted, or, in cases where each endorsement area. Records must be kept by the employing institution to substantiate this instructors teaching preparation-level courses must have a total of 2,000 hours of work In vocational education reimbursable programs, Such records may include written experience. Such records may include wristatements from supervisors at places of in question.

Health Occupations (Grades 9 through 12) ΰ

Twenty-four (24) semester hours, to include:

- A vocational/occupational education methods course at the upper-division level. 1
- Twelve (12) semester hours, including at least one course in each of the following areas: 5
- licensure/registration/certification, career mobility, job market, technologies and other introduction to various health professions, Introduction to Health Occupations education requirements, information; A
- Education nature and purpose of vocational, occupational and career education, their relationships and differences, and the place of each in preparing for the world of work; Principles and Philosophies of Vocational B)
- Development upper-division course in a systems approach to curriculum development Occupational Analysis and Curriculum ပ်

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vocational and occupational education. and instruction methods utilized in

Includes analyzing operations and jobs, specifying objectives, and developing curriculum;

- are based upon required occupational skills Occupational Internship - upper-division course(s) of experiential activities which and knowledge and are related to health occupations. â
- Endorsement 3
- in subsection (c)(2), licensure, registration In addition to the 12 semester hours listed or certification is required in one health occupations specialty, e.g., respiratory therapy, radiology, medical records technology, medical assisting, nursing or other health occupation. A A
- Records supervisors are no longer available to verify must be kept by the employing institution to instructors stating the facts concerning the supervisors at places of employment who can Such records documentation submitted, or, in cases where programs, instructors teaching preparation-level courses must have a total of 2,000 endorsement area being taught. If an instructor teaches in more than one endorsement area, the 2,000 hours shall be distributed among endorsement areas being taught, with a minimum of 250 hours work affidavits by applicants' hours of work experience in the specific experience in each endorsement area. In vocational education reimbursable may include written statements from be reached for verification of the substantiate this experience. work experience in question. the employment, â
- Home Economics (Grades 9 through 12) ਰ
- Twenty-four (24) semester hours, to include: 1)
- A vocational/occupational education methods æ

NOTICE OF PROPOSED AMENDMENTS

course at the upper-division level.

- Twelve (12) semester hours, to include one course in four of the six following areas: B)
- growth and development and care, adult Human Development, Child Development care, gerontology, administration of child care programs, instructional activities and materials for human, prenatal, child, adolescent preschoolers; <u>;</u>
- and Parenting interpersonal and family Interpersonal and Family Relationships relationships, family life, adult living, family dynamics, parenting, human relationships; ii)
- consumer economics, consumer management, resource management, home management; family finance, consumer education, Consumer and Resource Management iii)
- Housing, Interior Furnishings, Living interior design, household equipment, basic design, living environments, Environments - home furnishings, housing; iv)
- preparation, quantity food preparation, food sanitation, hospitality management, Hospitality - foods and nutrition, food food management, therapeutic nutrition; Food and Nutrition, Food Service, >
- Clothing, Textiles, Fashion clothing selection, clothing construction, costume design, history of fashion, apparel merchandising, textiles selection. vi)
- hours in addition to the 12 hours listed in subsection (d)(1)(B)) in the endorsement A minimum of one concentration (9 semester areas of: ົວ
- Child and Day Care Services 9 semester hours, to include 6 from subsection 7

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- (d)(1)(B)(i) and 3 from subsection (d)(1)(B)(ii);
- Food and Nutrition Services 9 semester hours from subsection (d)(1)(B)(v); ii)
- 0 Fashion and Clothing Services semester hours from subsection (d)(1)(B)(vi); iii)
- Environments 9 semester hours, to include 6 from subsection (d)(1)(B)(iv) and 3 from subsection(s) (d)(1)(B)(iii) Interior Furnishings Services/Living and/or (vi); iv)
- Services 9 semester hours, including one course from four of the areas listed in subsections (d)(1)(B)(i) - (v); Institutional and Home Management >
- Management 9 semester hours, to include 6 from subsection (d)(1)(B)(iii) (d)(1)(B)(i), (ii), (iv), (v), or (vi); or and the remainder from subsection Consumer Education and Resource vi)
- Interpersonal, Family Relationships, Parenting 9 semester hours, to include 6 from subsection (d)(1)(B)(ii) and 3 from subsection (d)(1)(B)(i). vii)
- Home Economics teachers who hold a Home Economics endorsement may teach an orientation/exploratory Ę. composite course which addresses a variety of subject areas in Home Economics Occupations. corresponds to the area of instruction, as provide instruction in a specific subject, teachers must hold the endorsement that identified in subsection (d)(1)(C). 5
- taught. If an instructor teaches in more than one experience in the specific endorsement area being distributed among endorsement areas being taught, instructors teaching preparation-level courses must have a total of 2,000 hours of work In vocational education reimbursable programs, endorsement area, the 2,000 hours shall be

3

with a minimum of 250 hours work experience in each endorsement area. Records must be kept by the employing institution to substantiate this experience. Such records may include written statements from supervisors at places of employment who can be reached for verification of the documentation submitted, or, in cases where supervisors are no longer available to verify the employment, affidavits by applicants' instructors stating the facts concerning the work experience in question.

- e) Industrial Technology Education (Grades 9 through 12)
- Twenty-four (24) semester hours, to include:
- A) A vocational/occupational education methods course at the upper-division level.
- B) Twelve (12) semester hours of laboratory-based courses in industrial technology, including at least one course in each of the following content areas:
- i) Communication Technology design and drafting, broadcasting, computers in communication, photography, graphic arts, telecommunications;
- ii) Production Technology managing the
 enterprise, materials and processes,
 research and development, producing,
 marketing, servicing in the
 manufacturing/construction enterprise;
- iii) Transportation Technology material
 handling conveyors, space
 transportation, atmospheric
 transportation, marine transportation,
 terrestrial transportation;
- iv) Energy Utilization Technology energy conversion, solar resources, wind and water resources, fossil fuels, nuclear energy resources, energy conservation.
- C) A minimum of one concentration (9 semester hours of laboratory-based courses in addition to the 12 semester hours listed in

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The state of the s

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subsection (e)(1)(B) in one of the

following endorsement areas:

- i) Construction carpentry, building maintenance, residential and commercial, electricity, painting, plumbing, cement and brick masonry, drywall application and roofing;
- ii) Electronics computer repair, radio
 and television repair, small appliance
 repair, electrical and electronic
 instrument repair, electromedical
 equipment repair, communication
 equipment installation and repair;
- iii) Graphic Communications press
 operation, composition and
 typesetting, commercial art,
 lithographic press operation,
 platemaking, photography, printing
 camera operation;
- iv) Transportation small gasoline engine repair, aircraft mechanical systems repair, automobile engine repair, diesel engine repair, automobile and truck mechanical systems repair, motor vehicle repair;
- Wanufacturing machine tool
 operation, tool and die making, sheet
 metal fabrication, welding and metal
 fabrication, production cabinet
 making, plastics-forming and
 fabrication, machinery maintenance,
 automated manufacturing equipment setup and maintenance, numerical control
 machine operation, computer numerical
 control machine operation;
- vi) Industrial Technology mechanical systems, hydraulic systems, pneumatic systems, thermal systems, electrical systems, communication systems, transportation systems, production systems, energy and power utilization;
- vii) Public Service fire-fighting

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justice technology, security services; technology, police science, criminal

- drafting, mechanical drafting, civil drafting, computer-aided drafting and Drafting/Design - architectural design, geometric construction, industrial design; viii)
- Autobody Repair frame inspection and alignment, body and fender repair, glass installation, vinyl top repair, automotive painting; or į×,
- Conditioning installation and repair ventilation systems, installation and of heating, air conditioning and repair of refrigeration and air Heating, Ventilation and Air conditioning systems.

×

teachers must hold an endorsement that corresponds to their area of instruction. To provide instruction at the preparation level, 5

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- experience in each specific endorsement area being taught. If an instructor teaches in more than one supervisors are no longer available to verify the employment, affidavits by applicants' instructors stating the facts concerning the work experience employment who can be reached for verification of distributed among endorsement areas being taught, the documentation submitted, or, in cases where each endorsement area. Records must be kept by the employing institution to substantiate this In vocational education reimbursable programs, instructors teaching preparation-level courses must have a total of 2,000 hours of work with a minimum of 250 hours work experience in experience. Such records may include written endorsement area, the 2,000 hours shall be statements from supervisors at places of in question. 3
- Vocational Education Teachers (Reimbursable Training Programs, Grades 9 through 12 f)

The requirements for instructional personnel to teach in reimbursable programs in Agricultural Education;

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Business, Marketing and Management; Health Occupations; Home Economics Occupations; and Industrial Technology Education are:

in one of the above occupational areas and possess Instructors must meet the certification standards a valid teaching certificate. ਜ

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- taught. If an instructor teaches in more than one the documentation submitted, or, in cases where supervisors are no longer available to verify the employment, affidavits by applicants' instructors stating the facts concerning the work experience Instructors teaching preparation-level courses must have a minimum of 2,000 hours of work experience in the specific endorsement area to be distributed among endorsement areas being taught, with a minimum of 250 hours work experience in employment who can be reached for verification of each endorsement area. Records must be kept by the employing institution to substantiate this experience. Such records may include written endorsement area, the 2,000 hours shall be experience. Such records may include wr statements from supervisors at places of in question.
- A district may employ an individual who does not have 2,000 hours of employment experience in the occupational specialty to be taught, provided that course specifically designed to supervise the work experience equal to one-half of the required 2,000 required 2,000 hours. Options chosen pursuant to this subsection must be described in detail in the Regional Education for Employment Plan and will be hours; or participation in a work experience with within four (4) years from the date of employment by either 2,000 hours of employment experience in the employment experience requirement will be met combination of work experience and directed occupational experience. A directed occupational supervision similar to that provided through a experience and a university credit-generating agency administrator equal to one-half of the university course setting provided by a local the occupational specialty to be taught or a experience means: a combination of work approved, if:
- The work experience is a paid employment B

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experience; and

- B) The work experience is outside of the education or teaching profession.
- 4) Cooperative Teacher Coordinator
- A) The requirements for teacher-coordinators of specialized cooperative education in Agricultural Education; Business, Marketing and Management; Health Occupations; Home Economics Occupations; and Industrial Technology Education include:
- Twenty-four (24) semester hours in the speciality area, which shall include a methods course, six (6) semester hours in the area of organization and administration of cooperative education; and
- ii) A minimum of 2,000 hours of employment experience in the occupational specialty to be taught; or
- iii) Completion of a directed occupational
 experience in the appropriate
 specialized area, equivalent to the
 2,000-hour employment requirement; or
- iv) Completion of a combination of employment experience and directed occupational experience equivalent to the 2,000-hour employment experience requirement within four (4) years from the date of initial employment as a coordinator.
- B) Options chosen pursuant to subsections (f)(4)(A)(iii) and (iv) shall be described in detail in the district's Regional Education for Employment Plan and will be approved, if:
- i) The work experience is a paid employment experience; and
- The work experience is outside of the education or teaching profession.

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Special Vocational Teacher Coordinator

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In schools with cooperative courses to serve students with special needs, such as the Work Experience and Career Exploration Program, Early School Leaver Program, and vocationally reimbursed Special Education Cooperative Education, the coordinator shall meet the requirements for specialized cooperative occupational education coordinators as shown in subsection (f)(4), except that the twenty-four (24) semester hours in the occupational specialty area shall be waived. The coordinator shall possess six (6) semester hours in the area of organization and administration of cooperative education.

 Interrelated Cooperative Occupational Teacher Coordinator and Cooperative Work Training (CWT) Teacher Coordinator Coordinators of interrelated cooperative education and cooperative work training shall meet certification standards in at least one of the specialty areas listed in subsection (f)(4)(A) and shall meet the requirements for a Cooperative Teacher Coordinator.

7) Compliance with Legal, Governmental and Professional Requirements For those occupations in which employment or preparation is regulated by law or licensure, compliance with those laws is required.

(Source: Amended at ______, effective ______

Section 1.736 Requirements to Take Effect on July 1, 1994

The requirements described in this Section shall apply only to Dersonnel employed on or after July 1, 1994.

- a) Health Education (Grades 9 through 12)
- 1) : 20 semester hours in the field.
- 2) Required Health Education Core Component One course from each of the following areas, for a total of 10-14 semester hours:

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- physiology may not be counted in meeting this Theories and Concepts of Health (Anatomy and requirement.) A
- Programs in School Health B
- Programs in Community Health 히
- Curriculum Development and Evaluation in Health Education a
- Additional Health Education content At least 10 semester hours distributed as follows: 듦
- At least one course in Human Sexuality or Sex Education A
- At least one course in Drug/Chemical Use and Abuse 덞
- At least two courses chosen from the following list of electives 히
- Mental/Emotional Health 4
- Environmental Health
- Disease Prevention and Control
- Nutrition and Dietary Patterns įv)
- Consumer Health ᅿ
- Safety and Injury Control vi)
- vii) Personal Health Practices
- Physical Education (Grades 9 through 12) a
- 24 semester hours in the field a
- Knowledge and Skill Acquisition At least one course in each of the following, for a total of at least 6 semester hours: 7
- Health-Related Fitness (e.g., conditioning, aerobic fitness exercise, stress management) a

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- Rhythm and Dance
- Individual Sports/Activities 히
- Team Sports a
- Scientific Foundations ন

At least 9 semester hours distributed as follows:

- 3 semester hours earned in at least one of the following: A
- Human Anatomy :
- Human Physiology ii)
- 6 semester hours from at least two of the following areas: B
- Exercise Physiology 4
- Kinesiology or Biomechanics Ţij
- Motor Learning, Motor Behavior, or Motor Development (iii
- one course in each of the following, all of which must explicitly include an Curriculum and Instruction - At least emphasis on both regular and special populations: 히
- Curriculum Design in Physical Education 듸
- Strategies/Methodology in Physical Instructional Education ŢŢ
- Education (Learning Assessment and Assessment/Evaluation of Physical Program Evaluation) tiit

__, effective Ill. Reg. ___ Added at (Source:

NOTICE OF PROPOSED RULE

- 1) Heading of the Part: Actuarial Opinion and Memorandum
- 2) Code Citation: 50 Ill. Adm. Code 1408

Proposed Action:	New Section									
3) Section Numbers:	1408.10	1408.20	1408.30	1408.40	1408.50	1408.60	1408.70	1408.80	1408.90	1408.ILLUSTRATION A

- 4) Statutory Authority: Implementing and authorized by Section 223 of the Illinois Insurance Code (Ill. Rev. Stat. 1989, ch. 73, par. 835 et seq., as amended by P.A. 87-0108, effective August 9, 1991.
- 5) A Complete Description of the Subjects and Issues Involved: This rule is being promulgated to implement P.A. 87-0108.
- 6) Will this proposed rule replace emergency rule currently in effect? No.
- 7) Does this rulemaking contain an automatic repeal date? No.
- 8) Does this proposed rule contain incorporations by reference? No.
- 9) Are there any other proposed amendments pending on this Part? No.
- 10) Statement of Statewide Policy Objectives: This proposed rule will not require a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.

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11) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Persons who wish to comment on this proposed rulemaking may submit written comments no later than 45 days after the publication of this Notice to:

Kirk H. Petersen Department of Insurance 320 West Washington Springfield, Illinois 62767 12) Initial Regulatory Flexibility Analysis: The Department has determined that this proposed rule will not effect small businesses.

The full text of the Proposed rule begins on the next page:

NOTICE OF PROPOSED RULE

CHAPTER I: DEPARTMENT OF INSURANCE SUBCHAPTER S: LEGAL RESERVE LIFE INSURANCE TITLE 50: INSURANCE

ACTUARIAL OPINION AND MEMORANDUM **PART 1408**

	Purpose	Scope	Definitions	General Reguirements	Reguired Opinions	Statement of Actuarial Opinion Not Including an	Asset Adequacy Analysis	Statement of Actuarial Opinion Based on Asset	Adequacy Analysis	Description of Actuarial Memorandum Including an	Asset Adequacy Analysis	Additional Considerations for Analysis	1408.ILLUSTRATION A Statement of Actuarial Opinion Based on	Asset Adequacy Analysis Format
Section	1408.10	1408.20	1408.30	1408.40	1408.50	1408.60		1408.70		1408.80		1408.90	1408.ILLU	

Illinois Insurance Code (III. Rev. Stat. 1989, ch. 73, par. 835 et seq., as amended by P.A. 87-0108, effective August 9, 1991). AUTHORITY: Implementing and authorized by Section 223 of the

Ill. Reg. SOURCE: Adopted at effective

Section 1408.10 Purpose

The purpose of this Part is to prescribe:

- Guidelines and standards for statements of actuarial opinion which are to be submitted in accordance with Section 223(la) of the Illinois Insurance Code, and for memoranda in support thereof. a)
- exempt from Section 223(1a)(B) of the Illinois Insur-Guidelines and standards for statements of actuarial opinion which are to be submitted when a company is a
- Reguirements applicable to the appointment of an appointed actuary. ΰ

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NOTICE OF PROPOSED RULE

Scope Section 1408.20

- This Part shall apply to all life insurance companies and fraternal benefit societies doing business in this State and to all life insurance companies and fraternal benefit societies which are authorized to reinsure life Director for year ending on or after December 31, 1992. Except with respect to companies which are exempted pursuant to Section 1408.50 of this Part, a statement of opinion on the adequacy of the reserves and related actuarial items based on an asset adequacy analysis in accordance with Section 1408.80 of this Part, shall be required each year. Any company so exempted must file a statement of actuarial opinion pursuant to Section This Part shall be applicable insurance, annuities or accident and health insurance business in this State. This Part shall be applicable to all annual statements filed with the office of the accordance with Section 1408.70 and Illustration A of this Part, and a memorandum in support thereof, in 1408.60 of this Part.
- Notwithstanding the foregoing, the Director may require any company otherwise exempt pursuant to Section 1408.50 of this Part to submit a statement of actuarial opinion and to prepare a memorandum in support thereof Director, an asset adequacy analysis is necessary for in accordance with Sections 1408.70, Illustration A, and 1408.80 of this Part if, in the opinion of the the company. â

Section 1408.30 Definitions

"Actuarial Standards Board" is the board established by the American Academy of Actuaries to develop and promulgate standards of actuarial practice.

Section 136 of the Illinois Insurance Code (111. Rev. Stat. 1989, ch. 73, par. 748) to be filed by the company with the office of the Director annually. "Annual Statement" means that statement required

pointed or retained in accordance with the requirements set forth in Section 1408.40(c) of this Part to provide "Appointed Actuary" means any individual who is apthe actuarial opinion and supporting memorandum as required by Section 223(la) of the Code.

"Asset Adequacy Analysis" means an analysis that meets the standards and other requirements referred to in Section 1408.40(d) of this Part. It may take many forms, including, but not limited to, cash flow testing, sensitivity testing or applications of risk theory.

"Code" means the Illinois Insurance Code (Ill. Rev. Stat. 1989, ch. 73, par. 835 et seq., as amended by P.A. 87-0108, effective August 9, 1991).

"Company" means a life insurance company, fraternal benefit society or reinsurer subject to the provisions of this Part. "Director" means the Insurance Director of this State.

"Non-Investment Grade Bonds" are those designated as classes 3, 4, 5 or 6 by the NAIC Securities Valuation Office.

"Qualified Actuary" means any individual who meets the requirements set forth in Section 1408.40(b) of this Part.

Section 1408.40 General Requirements

- a) Submission of the Statement of Actuarial Opinion
- the annual statement the statement of an appointed actuary, entitled "Statement of Actuarial Opinion," setting forth an opinion relating to reserves and related actuarial items held in support of policies and contracts, in accordance with Section 1408.70 and Illustration A of this Part; provided, however, that any company exempted pursuant to Section 1408.50 of this Part shall include on or attach to Page 1 of the annual statement a statement of actuarial opinion rendered by an appointed actuary in accordance with Section 1408.60 of this Part.
- 2) If in the previous year a company provided a statement of actuarial opinion in accordance with Section 1408.60 of this Part, and in the current year fails the exemption criteria of Sections 1408.50(c)1, (2), or (3), to again provide an

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actuarial opinion in accordance with Section 1408.60, the statement of actuarial opinion in accordance with Section 1408.70 and Illustration A shall not be required until August I following the date of the annual statement. In this instance, the company shall provide a statement of actuarial opinion in accordance with Section 1408.60 with appropriate qualification noting the intent to subsequently provide a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A.

- 3) In the case of a statement of actuarial opinion required to be submitted by a foreign or alien company, the Director may accept the statement of actuarial opinion filed by such company with the insurance regulatory body of another state if the Director determines that the opinion reasonably meets the requirements applicable to a company domiciled in this State.
- 4) Upon written request by the company, the Director may grant an extension of the date for submission of the statement of actuarial opinion.

b) Qualified Actuary

- A "qualified actuary" is an individual who:
- Is a member in good standing of the American Academy of Actuaries; and
- 2) Is qualified to sign statements of actuarial opinion for life and health insurance company annual statements in accordance with the American Academy of Actuaries qualification standards for actuaries signing such statements; and
- 3) Is familiar with the valuation requirements applicable to life and health insurance companies; and
- 4) Has not been found by the Director (or if so found has subsequently been reinstated as a qualified actuary), following appropriate notice and hearing to have:

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- violated any provision of, or any obligation imposed by, the Illinois Insurance Code or other law in the course of his or her dealings as a qualified actuary; or A)
- been found guilty of fraudulent or dishonest practices; or B)
- or untrustworthiness to act as a demonstrated his or her incompetency, lack of qualified actuary; or cooperation, ວ
- (5) years, pursuant to this Part, an actuarial opinion or memorandum that the Director rejected because it did not meet the provisions of submitted to the Director during the past five this Part including standards set by the Actuarial Standards Board; or â
- examination or as a result of failure to adhere to generally acceptable actuarial standards; the past five (5) years as a result of acts or resigned or been removed as an actuary within omissions indicated in any adverse report on (i)
- Has not failed to notify the Director of any action take by any Director of any other state similar to that under subsection (b)(4) above. 2

Appointed Actuary ΰ

An "appointed actuary" is a qualified actuary who is appointed or retained to prepare the Statement of Actuarial Opinion required by this Part; either directly or by the authority of the board of directors this person, provided that the company shall give the Director timely written notice in the event the actuary of the name, title (and, in the case of a consulting actuary, the name of the firm) and manner of appointment or retention of each person appointed or retained by the company as an appointed actuary and shall state company shall give the Director timely written notice in such notice that the person meets the requirements set forth in Section 1408.40(b). Once notice is furnished, no further notice is required with respect to through an executive officer of the company.

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as an appointed actuary replaces a previously appointed actuary, the notice shall so state and give the reasons actuary or to meet the requirements set forth in Section 1408.40(b). If any person appointed or retained ceases to be appointed or retained as an appointed for replacement.

Standards for Asset Adequacy Analysis þ

The asset adequacy analysis required by this Part:

- Ø under this Part, which standards are to form the basis of the statement of actuarial opinion in accordance with Section 1408.70 and Illustration Standards Board and on any additional standards promulgated from time to time by the Actuarial Shall conform to the Standards of Practice as of this Part; and 7
- Shall be based on methods of analysis as are deemed appropriate for such purposes by the Actuarial Standards Board. 5

Liabilities to be Covered е •

- Under authority of Section 223 of the Code the statement of actuarial opinion shall apply to all in force business on the annual statement date regardless of when or where issued, including reserves and equivalent items in the separate account statement or statements. 1
- of asset adequacy analysis that a reserve should be held in addition to the aggregate reserve held by If the appointed actuary determines as the result the company and calculated in accordance with methods set forth in Section 223(3)(b), (f) and (g), (5) and (7) of the Code, the company shall establish such additional reserve. 5
- reserve in an amount not less than the following: For years ending prior to December 31, 1994, the company may, in lieu of establishing the full amount of the additional reserve in the annual statement for that year, set up an additional 3
- December 31, 1992, the additional reserve

DEPARTMENT OF INSURANCE NOTICE OF PROPOSED RULE

divided by three.

- December 31, 1993, two times the additional reserve divided by three. a
- released must be disclosed in the actuarial opinion for the applicable year. The release of such reserves would not be deemed an adoption of a lower (e)(2) and (3) above, and deemed not necessary in subsequent years, may be released. Any amounts Additional reserves established under subsection standard of valuation. 4

Required Opinions Section 1408.50

General a)

company doing business in this State shall annually submit the opinion of an appointed actuary as provided by this Part. The type of opinion submitted shall be determined by the provisions set forth in this Section In accordance with Section 223(1a) of the Code, every and shall be in accordance with the applicable provisions in this Part.

Company Categories â

For purposes of this Part, companies shall be classified as follows based on the admitted assets as of the end of the calendar year for which the actuarial opinion is applicable:

- Category A shall consist of those companies whose admitted assets do not exceed \$20 million; 7
- Category B shall consist of those companies whose admitted assets exceed \$20 million but do not exceed \$100 million; 5
- Category C shall consist of those companies whose admitted assets exceed \$100 million but do not exceed \$500 million; and 3
- Category D shall consist of those companies whose admitted assets exceed \$500 million. 4
- Exemption Eligibility Tests ΰ

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- Any Category A company that meets all of the following criteria shall be eligible for exemption from submitting a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A of this Part for the year in which these criteria are met. The ratios in subsections (A), (B) and (C) below shall be calculated based on amounts as of the end of the calendar year for which the actuarial opinion is applicable. 1
- the sum of cash and invested assets is at least The ratio of the sum of capital and surplus to equal to .10. ¥
- The ratio of the sum of the reserves and liabilities for annuities and deposits to the total admitted assets is less than .30. B
- The ratio of the book value of the non-investment grade bonds to the sum of capital and surplus is less than .50. ົວ
- dar years preceding the calendar year for which the actuarial opinion is applicable, or the company has resolved the first or second priority status to the satisfaction of the Director The Examiner Team for the National Association preceding the calendar year for which the actuarial opinion is applicable, or a second priority company in each of the two (2) calencompany in any of the two (2) calendar years of Insurance Commissioners (NAIC) has not designated the company as a first priority of the state of domicile. â
- lowing criteria shall be eligible for exemption from submitting a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A of this Part for the year in which the criteria are met. The ratios in subsections (A), (B) and (C) the end of the calendar year for which the actuari-Any Category B company that meets all of the folbelow shall be calculated based on amounts as of al opinion is applicable. 6

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- A) The ratio of the sum of capital and surplus to the sum of cash and invested assets is at least equal to .07.
- B) The ratio of the sum of the reserves and liabilities for annuities and deposits to the total admitted assets is less than .40.
- C) The ratio of the book value of the non-investment grade bonds to the sum of capital and surplus is less than .50.
- D) The Examiner Team for the National Association of Insurance Commissioners (NAIC) has not designated the company as a first priority company in any of the two (2) calendar years preceding the calendar year for which the actuarial opinion is applicable, or a second priority company in each of the two (2) calendar years preceding the calendar years for which the actuarial opinion is applicable, or the company has resolved the first or second priority status to the satisfaction of the Director of the state of domicile.
- 3) Any Category A or Category B company that meets all of the criteria set forth in subsection (c)(1) and (2) above, whichever is applicable, is exempted from submitting a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A of this Part unless the Director specifically indicates to the company that the exemption is not to be taken.
- Any Category A or Category B company that is not exempted under subsection (c)(3) above shall be required to submit a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A of this Part for the year for which it is not
- 5) Any Category C company that, after submitting an opinion in accordance with Section 1408.70 and Illustration A of this Part, meets all of the following criteria shall not be required, unless required in accordance with subsection (c)(6) below, to submit a statement of actuarial opinion

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in accordance with Section 1408.70 and Illustration A of this Part more frequently than every third year. Any Category C company which fails to meet all of the following criteria for any year shall submit a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A of this Part for that year. The ratios in (A), (B) or (C) below shall be calculated based on amounts as of the end of the calendar year for which the actuarial opinion is applicable.

- A) The ratio of the sum of capital and surplus to the sum of cash and invested assets is at least equal to .05.
- B) The ratio of the sum of the reserves and liabilities for annuities and deposits to the total admitted assets is less than .50.
- C) The ratio of the book value of the non-investment grade bonds to the sum of the capital and surplus is less than .50.
- Of Insurance Commissioners (NAIC) has not designated the company as a first priority company in any of the two (2) calendar years preceding the calendar year for which the actuarial opinion is applicable, or a second priority company in each of the two (2) calendar years preceding the calendar year for which the actuarial opinion is applicable, or a second the actuarial opinion is applicable, or the company has resolved the first or second priority status to the satisfaction of the Director of the state of domicile.
- 6) Any company which is not required by Section 1408.50 to submit a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A of this Part for any year shall submit a statement of actuarial opinion in accordance with Section 1408.60 of this Part for that year unless as provided for by Section 1408.20(b) of this Part the Director requires a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A of this Part.

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d) Large Companies

Every Category D company shall submit a statement of actuarial opinion in accordance with Section 1408.70 and Illustration A of this Part.

Section 1408.60 Statement of Actuarial Opinion Not Including an Asset Adequacy Analysis

a) General Description

The statement of actuarial opinion required by this Section shall consist of:

- A paragraph identifying the appointed actuary and his or her qualifications;
- the company is exempt pursuant to Section
 1408.50 of this Part from submitting a statement of actuarial opinion based on an asset
 adequacy analysis and that the opinion, which
 is not based on an asset adequacy analysis, is
 rendered in accordance with Section 1408.60 of
 this Part;
- 3) A scope paragraph identifying the subjects on which the opinion is to be expressed and describing the scope of the appointed actuary's work; and
- 4) An opinion paragraph expressing the appointed actuary's opinion as required by Section 223(1a) of the Code.

b) Recommended Language

The following language provided is that which in typical circumstances would be included in a statement of actuarial opinion in accordance with this Section. The language may be modified as needed to meet the circumstances of a particular case, but the appointed actuary should use language which clearly expresses his or her professional judgment. However, in any event the opinion shall retain all pertinent aspects of the language provided in Section 1408.60.

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The opening paragraph should indicate the appointed actuary's relationship to the company.

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- A) For a company actuary, the opening paragraph of the actuarial opinion should read: "I, [name of actuary], am [title] of [name of company] and a member of the American Academy of Actuaries. I was appointed by, or by the authority of, the Board of Directors of said insurer to render this opinion as stated in the letter to the Director dated [insert date]. I meet the Academy qualification standards for rendering the opinion and am familiar with the valuation requirements applicable to life and health companies."
- B) For a consulting actuary, the opening paragraph of the actuarial opinion should read: "I, [name of actuary], a member of the American Academy of Actuaries, am associated with the firm of [insert name of consulting firm]. I have been appointed by, or by the authority of the Board of Directors of [name of company] to render this opinion as stated in the letter to the Director dated [insert date]. I meet the Academy qualification standards for rendering the opinion and am familiar with the valuation requirements applicable to life and health insurance companies."
- 2) The regulatory authority paragraph should include a statement such as the following: "Said company is exempt pursuant to Part 1408.40 of the Illinois Department of Insurance from submitting a statement of actuarial opinion based on an asset adequacy analysis. This opinion, which is not based on an asset adequacy analysis, is rendered in accordance with Section 1408.60 of the Part."
- 3) The scope paragraph should contain a sentence such as the following: "I have examined the actuarial assumptions and actuarial methods used in determining reserves and related actuarial items listed below, as shown in the annual statement of the company, as prepared for filling with state regulatory officials, as of December 31, []." This paragraph should also list items and amounts with

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ing an opinion. The list should include but not be respect to which the appointed actuary is expressnecessarily limited to:

- cies and contracts included in Exhibit 8 of the Aggregate reserve and deposit funds for poliannual statement; æ
- Aggregate reserve and deposit funds for policies and contracts included in Exhibit 9 of the annual statement; B
- involving life contingencies included in Exhibaccumulations and supplementary contracts not Deposit funds, premiums, dividend and coupon it 10 of the annual statement; and ΰ
- current year included in Exhibit 11, Part I of Policy and contract claims - liability end of the annual statement. Ω Ω
- If the appointed actuary has examined the underlyincluded such review of the actuarial assumptions and actuarial methods and of the underlying basic ing records, the scope paragraph should also include a statement which reads: "My examination records and such tests of the actuarial calculations as I considered necessary." 4
- and summaries of policies in force prepared by the should include a sentence such as one of the fol-If the appointed actuary has not examined the underlying records, but has relied upon listings company or a third party, the scope paragraph 2
- policies and contracts and other liabilities in officer certifying in force records] as certified in the attached statement. (See accompaof the actuarial assumptions and actuarial methods and such tests of the actuarial calcuother respects my examination included review "I have relied upon listings and summaries of force prepared by [name and title of company nying affidavit by a company officer.) lations as I considered necessary." or A A

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DEPARTMENT OF INSURANCE

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- other liabilities, as certified in the attached and actuarial methods and such tests of the actuarial calculations as I considered neces-"I have relied upon [name of accounting firm] for the substantial accuracy of the in force statement. In other respects my examination included review of the actuarial assumptions records inventory and information concerning B)
- The opinion paragraph should include a statement which reads: "In my opinion the amounts carried in the balance sheet on account of the actuarial items Identified above: 9
- applied and are fairly stated in accordance accepted actuarial standards consistently Are computed in accordance with presently with sound actuarial principles; A
- duce reserves at least as great as those called Are based on actuarial assumptions which probasis and method, and are in accordance with for in any contract provision as to reserve all other contract provisions; B)
- regulations of the state of [state of domicile] and are at least as great as the minimum aggre-Meet the requirements of the Insurance Law and gate amounts required by the state in which this statement is filed. ົວ
- preceding year-end with any exceptions as noted sistent with those used in computing the corresponding items in the annual statement of the Are computed on the basis of assumptions conbelow; and â
- and related statement items which ought to be Include provision for all actuarial reserves established. (i
- analyses used in forming my opinion conform to the appropriate Standards of Practice as pro-mulgated by the Actuarial Standards Board, The actuarial methods, considerations and E E

NOTICE OF PROPOSED RULE

which standards form the basis of this statement of opinion."

- The concluding paragraph should document the eligibility for the company to submit an opinion as provided by this Section and Illustration A. It shall include the following: 5
- considered in light of the assets which support Section 1408.60 of this Part. As such it does not include an opinion regarding the adequacy of reserves and related actuarial items when "This opinion is provided in accordance with A
- Eligibility is confirmed as follows: B
- the admitted assets of the company (Section surplus to the sum of cash and invested assets is [insert amount], which equals or exceeds the applicable criterion based on The ratio of the sum of capital and ÷
- the excess of the total admitted assets is liabilities for annuities and deposits to [insert amount], which is less than the applicable criteria based on the admitted assets of the company (Section 1408.50). The ratio of the sum of the reserves and ii)
- which is less than the applicable criteria non-investment grade bonds to the sum of capital and surplus is [insert amount], The ratio of the book value of the οţ 111)
- of the two (2) calendar years preceding the calendar year for which this actuarial cable, or a second priority company in each priority company in any of the two (2) calendar years preceding the calendar year for which this actuarial opinion is applihas not designated the company as a first opinion is applicable or the company has To my knowledge, the NAIC Examiner Team resolved the first or second priority iv)

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status to the satisfaction of the Director of the state of domicile.

 v) To my knowledge there is not a specific request from any Director requiring an asset adequacy analysis opinion.

Signature of Appointed Actuary

Address of Appointed Actuary

relephone Number of Appointed Actuary

- graph)." The adoption for new issues or new claims or other new liabilities of an actuarial assumption which differs from a corresponding assumption used for prior new issues or new claims or other new liabilities is not a change in actuarial assumptions within the meaning of this subsection. assumptions from those previously employed, that change should be described in the annual statement ". . . with the or in a paragraph of the statement of actuarial opinion, and the reference in subsection (b)(6)(D) above to consistency should read: ". . . with the exception of the change described in Page [] of the annual statement (or in the preceding para-If there has been any change in the actuarial 8
- If the appointed actuary is unable to form an opinion, he or she shall refuse to issue a state-ment of actuarial opinion. If the appointed actuary's opinion is adverse or qualified, he or she shall issue an adverse or qualified actuarial opinion explicitly stating the reason(s) for such This statement should follow the scope paragraph and precede the opinion paragraph. opinion. 6
- ion as to the accuracy and completeness of the listings and summaries of policies in force, there If the appointed actuary does not express an opinshall be attached to the opinion, the statement of 10)

NOTICE OF PROPOSED RULE

a company officer or accounting firm who prepared such underlying data similar to the following:

31, [], prepared for and submitted to [name of appointed actuary], were prepared under my direction and, to the best of my knowledge and belief, are substantially accurate and comaddress of company or accounting firm], hereby affirm that the listings and summaries of policies and contracts in force as of December "I [name of officer], [title] of [name and plete.

Signature of the Officer of the Company or Accounting Firm

Address of the Officer of the Company or Accounting Firm

Telephone Number of the Officer of the

Statement of Actuarial Opinion Based On an Company or Accounting Firm" Section 1408.70

Asset Adequacy Analysis

A Statement of Actuarial Opinion based on an asset adequacy analysis shall be consistent with Illustration A of this Part.

Description of Actuarial Memorandum Including an Asset Adequacy Analysis Section 1408.80

General a)

his or her opinion regarding the reserves under the opinion. The memorandum shall be made available for examination by the Director upon his or her request, but shall be returned to the company after appointed actuary shall prepare a memorandum to the company describing the analysis done in support of In accordance with Section 223(la) of the Code, such examination and shall not be considered a 7

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record of the Insurance Department or subject to automatic filing with the Director.

- other actuaries who are qualified within the meaning of Section 1408.40(b) of this Part, with re-In preparing the memorandum, the appointed actuary spect to the areas covered in such memoranda, and may rely on, and include as a part of his or her own memorandum, memoranda prepared and signed by so state in their memoranda. 5
- memorandum as is required for review. The expense of the independent review shall be paid by the company but shall be directed and controlled by the the analysis described in the memorandum fails to meet the standards of the Actuarial Standards Board or the standards and requirements of this Part, the If the Director requests a memorandum and no such memorandum exists, or if the Director finds that review the opinion and prepare such supporting Director may designate a qualified actuary to 3
- an examiner for purposes of obtaining data from the company and the work papers and documentation of Ø provided by the company to the reviewing actuary and included in the work papers shall be considered as material provided by the company to the Director The reviewing actuary shall have the same status as material provided by the company to the Director pursuant to Section 223(1a)(A)(11) of the Code. The reviewing actuary shall not be an employee of consulting firm involved with the preparation of and shall be kept confidential to the same extent Director; provided, however, that any information pursuant to this Part for any one of the current any prior memorandum or opinion for the insurer the reviewing actuary shall be retained by the as is prescribed by law with respect to other year or the preceding three (3) years. 4
- Details of the Memorandum Section Documenting Asset Adequacy Analysis (Section 1408.70) Q

Illustration A is provided, the memorandum shall demonstrate that the analysis has been done in accordance When an actuarial opinion under Section 1408.70 and

NOTICE OF PROPOSED RULE DEPARTMENT OF INSURANCE

with the standards for asset adequacy referred to in Section 1408.40(d) of this Part and any additional It shall specify: standards under this Part.

1) For reserves:

- tion, underwriting and other aspects of a risk profile and the specific risks the appointed Product descriptions including market descripactuary deems significant; A
- Source of liability in force; B
- Reserve method and basis; ີວ
- Investment reserves; â
- Reinsurance arrangements. <u>ы</u>

assets: For 5

- Portfolio descriptions, including a risk pro-file disclosing the quality, distribution and types of assets; A)
- Investment and disinvestment assumptions; B)
- Source of asset data; ີວ
- Asset valuation bases. Ω
- Analysis basis: 3)
- Methodology; A)
- blocks of business and how pertinent risks were for inclusion/exclusion of different Rationale analyzed; B)
- Rationale for degree of rigor in analyzing different blocks of business; ົວ
- Criteria for determining asset adequacy; â
- Effect of federal income taxes, reinsurance and other relevant factors. (i

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- Summary of Results 4
- Conclusion(s) 2
- Conformity to Standards of Practice ΰ

"Actuarial methods, considerations and analyses used in appropriate Standards of Practice as promulgated by the Actuarial Standards Board, which standards form the basis for this memorandum." The memorandum shall include a statement which reads: the preparation of this memorandum conform to the

Section 1408.90 Additional Considerations for Analysis

Aggregation a

For the asset adequacy analysis for the statement of actuarial opinion provided in accordance with Section 1408.70 and Illustration A of this Part, reserves and assets may be aggregated by either of the following

- or lines of business, before analyzing the adequacy Aggregate the reserves and related actuarial items, of the combined assets to mature the combined liabilities. The appointed actuary must be satismature the liabilities from the blocks of business and the supporting assets, for different products fied that the assets held in support of the reserves and related actuarial items so aggregated are managed in such a manner that the cash flows from the aggregated assets are available to help that have been aggregated. 7
- redundant, with the results of one or more products Aggregate the results of asset adequacy analysis of or lines of business, the reserves for which prove actuary must be satisfied that the asset adequacy results for the various products or lines of business for which the results are so aggregated: through analysis to be deficient. The appointed reserves for which prove through analysis to be one or more products or lines of business, the 5
- Are developed using consistent economic A)

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Are subject to mutually independent risks, i.e., the likelihood of events impacting the adequacy of the assets supporting the redundant reserves is completely unrelated to the likelihood of events impacting the adequacy of the assets supporting the deficient reserves.

B)

In the event of any aggregation, the actuary must disclose in his or her opinion that such reserves were aggregated on the basis of method (1), (2)(A) or (2)(B)above, whichever is applicable, and describe the aggregation in the supporting memorandum.

Selection of Assets for Analysis â

supporting a group of specified reserves cannot support any other group of specified reserves. An asset may be allocated over several groups of specified reserves. The annual statement value of the assets held in support of the reserves shall not exceed the annual statement value of the specified reserves, except as provided in subsection (c) below. If the method of asset allocation is not consistent from year to year, the extent of its inconsistency should be described in the The appointed actuary shall analyze only those assets held in support of the reserves which are the subject for specific analysis, hereafter called "specified reserves." A particular asset or portion thereof supporting memorandum.

Use of Assets Supporting the Interest Maintenance Reserve and the Asset Valuation Reserve ົວ

serve (IMR), whether positive or negative, must be used in any asset adequacy analysis. Analysis of risks regarding asset default may include assets supporting may include assets supporting other mandatory or voluntary reserves available to the extent not used for risk may not be applied for any other risks with respect to reserve adequacy. Analysis of these and other risks Assets in the amount of the Interest Maintenance Rethe Asset Valuation Reserves (AVR); these AVR assets analysis and reserve support.

οf disclosed in the Table of Reserves and Liabilities The amount of the assets used for the AVR must be the opinion and in the memorandum, as well as the

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method used for selecting particular assets or allocated portions of assets.

Required Interest Scenarios ਰ

- appointed actuary must consider in the analysis the effect of at least the following interest rate For the purpose of performing the asset adequacy analysis required by this Part, the qualified actuary is expected to follow standards adopted by the Actuarial Standards Board; nevertheless, the scenarios: 7
- Level with no deviation; A)
- Ø Uniformly increasing over ten (10) years at half percent per year and then level; B)
- over five (5) years and then uniformly decreas-Uniformly increasing at one percent per year ing at one percent per year to the original level at the end of ten (10) years and then level; ົວ
- An immediate increase of three percent (3%) and then level; â
- Uniformly decreasing over ten (10) years at half percent per year and then level; (i
- Uniformly decreasing at one percent per year over five (5) years and then uniformly increaslevel at the end of ten (10) years and then ing at one percent per year to the original level; and ٦ ا
- An immediate decrease of three percent (3%) and then level. 9
- For any other scenarios which may be used, interest maximum interest rate of twenty-five percent (25%) and an overall minimum interest rate of four perrates on such scenarios are subject to an overall cent (4%) per year. 6
- The beginning interest rates may be based on interest rates for new investments as of the valuation 3

NOTICE OF PROPOSED RULE

DEPARTMENT OF INSURANCE

mine the beginning yield curve and associated interest rates should be specifically defined. The beginning yield curve and associated interest rates should be consistent for all interest rate scenarisupport the product being tested or be based on an outside index, such as Treasury yields, of assets valuation date. Whatever method is used to deterof the appropriate length on a date close to the similar to recent investments allocated

Documentation ê

least seven (7) years, sufficient documentation so that it will be possible to determine the procedures followed, the analyses performed, the bases for assumptions and the results obtained. The appointed actuary shall retain on file, for at

1408.ILLUSTRATION A A Statement of Actuarial Opinion Based on Asset Adequacy Analysis Format

General Description a)

The statement of actuarial opinion submitted in accordance with Section 1408.70 shall consist of:

- A paragraph identifying the appointed actuary and his or her qualifications (subsection (b)(1) be-7
- A scope paragraph identifying the subjects on which an opinion is to be expressed and describing the scope of the appointed actuary's work, including a tabulation delineating the reserves and related actuarial items which have been analyzed for asset adequacy and the method of analysis, (see subsection (b)(2) below) and identifying the reserves related actuarial items covered by the opinion which have not been so analyzed; 5
- currently owned assets, including variation in cash flows according to economic scenarios (see any, where the appointed actuary has deferred to other experts in developing data, procedures or A reliance paragraph describing those areas, if assumptions, (e.g., anticipated cash flows from 3)

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subsection (b)(3) below), supported by a statement of each such expert in the form prescribed by subsection (e) below; and

- An opinion paragraph expressing the appointed actuary's opinion with respect to the adequacy of the supporting assets to mature the liabilities (see subsection (b)(6) below). 4
- or more additional paragraphs will be needed in individual company cases as follows: One 2
- to state a qualification of his or her opinion; If the appointed actuary considers it necessary a
- method of aggregation for reserves of different products or lines of business for asset adequa-If the appointed actuary must disclose the cy analysis; B
- If the appointed actuary must disclose reliance other mandatory or voluntary statement reserves upon any portion of the assets supporting the Mandatory Security Valuation Reserve (MSVR) or for asset adequacy analysis. ΰ
- opinion date with that used for this opinion. inconsistency in the method of analysis or basis of asset allocation used at the prior If the appointed actuary must disclose an â
- If the appointed actuary must disclose whether additional reserves of the prior opinion date are released as of this opinion date, and the extent of the release. (E
- If the appointed actuary chooses to add a paragraph briefly describing the assumptions which form the basis for the actuarial opinion. 면

Recommended Language Q Q

The following paragraphs are to be included in the statement of actuarial opinion in accordance with Section 1408.70. Language is that which in typical actuarial opinion. The language may be modified as circumstances should be included in a statement of

NOTICE OF PROPOSED RULE

needed to meet the circumstances of a particular case, but the appointed actuary should use language which clearly expresses his or her professional judgment. However, in any event the opinion shall retain all pertinent aspects of the language provided in this subsection.

- The opening paragraph should generally indicate the appointed actuary's relationship to the company and his or her qualifications to sign the opinion. 1
- For a company actuary, the opening paragraph of the actuarial opinion should read: "I, [name], the opinion and am familiar with the valuation requirements applicable to life and health the actuarial opinion should read: "I, [name am [title] of [insurance company name] and a was appointed by, or by the authority of, the this opinion as stated in the letter to the Director dated [insert date]. I meet the Academy qualification standards for rendering member of the American Academy of Actuaries. Board of Directors of said insurer to render insurance companies." A)
- For a consulting actuary, the opening paragraph should read: "I, [name], a member of the have been appointed by, or by the authority of, the Board of Directors of [name of company] to render this opinion as stated in the letter to the Director dated [insert date]. I meet the the opinion and am familiar with the valuation Academy qualification standards for rendering American Academy of Actuaries, am associated with the firm of [name of consulting firm]. requirements applicable to life and health insurance companies." B)
- sumptions and actuarial methods used in determining reserves and related actuarial items listed below, as shown in the annual statement of the company, as prepared for filing with state regulatory officials, as of December 31, 19[]. Tabulated below are those reserves and related actuarial items which have been subjected to asset adequacy analy-The scope paragraph should include a statement which reads: "I have examined the actuarial assis." 5

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	Reserves	and L	Reserves and Liabilities		
	Asset Adequacy	quacy	Analyzed	Other	Total
Stat	Statement Item Amount	ţ	Method*	Amount	Amount
Exhibit	bit 8				
A	Life Insurance				
щ	Annuities				
ပ	+				
	Involving Life Contingencies	cies			
Ω	Accidental Death Benefit				
E	1				
Ē	Disability - Disabled				
ŋ	Miscellaneous	1			
	Total (Exhibit 8 Item 1,	., Page	3)		
Exhi A	Exhibit 9 A Active Life Reserve				
Ф	Claim Reserve	1			
	Total (Exhibit 9 Item 2	2, Page	3)		
Exhi	Exhibit 10				
7	Premiums and Other Deposit	sit Funds	ds		
1:1	Policyholder Premiums (Page 3 Line 10 1)				
1.2		Contracts			
1.3	Contract Deposit	Funds			
r	(Page 3, Line 10.3)	No.			
	Involving Life Contingencies	ncies			
	(Page 3, Line 3)				
ë.	Dividend and Coupon Accumulations (Page 3, Line 5)	ımulatı	ons		
	•				
	Total Exhibit 10				

Total Exhibit 11, Part 1

Separate Accounts

Exhibit 11 Part 1 1 Life (Page 3, Line 4.1)

(Page 3, Line 4.2)

Health

NOTICE OF PROPOSED RULE

	,
RESERVES	
SUBTOTAL, RESERVES Line Line Line	GRAND TOTAL
IMR (Page AVR (Page	GRAND
IMR	

(Page 3, Line 27)

- 3) If the appointed actuary has relied on other experts to develop certain portions of the analysis, the reliance paragraph should include a statement such as the following:
- A) "I have relied on [name], [title] for [e.g., anticipated cash flows from currently owned assets, including variations in cash flows according to economic scenarios] and, as certified in the attached statement, . . ."or
- B) "I have relied on personnel as cited in the supporting memorandum for certain critical aspects of the analysis in reference to the accompanying statement."
- 4) If the appointed actuary has examined the underlying asset and liability records, the reliance
 paragraph should also include: "My examination
 included such review of the actuarial assumptions
 and actuarial methods and of the underlying basic
 asset and liability records and such tests of the
 actuarial calculations as I considered necessary."
- underlying records, but has relied upon listings and summaries of policies in force and/or asset records prepared by the company or a third party, the reliance paragraph should include a sentence such as
- A) "I have relied upon listings and summaries [of policies and contracts, of asset records] prepared by [name and title of company officer certifying in force records] as certified in the attached statement. In other respects my examination included such review of the actuarial assumptions and actuarial methods and such

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tests of the actuarial calculations as I considered necessary." or

- B) "I have relied upon [name of accounting firm] for the substantial accuracy of the in force records inventory and information concerning other liabilities, as certified in the attached statement. In other respects my examination included review of the actuarial assumptions and actuarial methods and tests of the actuarial al calculations as I considered necessary."
- 6) The opinion paragraph should include a statement which reads:
- A) In my opinion the reserves and related actuarial values concerning the statement items identified above:
- Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated, in accordance with sound actuarial principles;
- ii) Are based on actuarial assumptions which produce reserves at least as great as those called for in any contract provision as to reserve basis and method, and are in accordance with all other contract provisions;
- iii) Meet the requirements of the Insurance Law and regulation of the state of [state of domicile] and are at least as great as the minimum aggregate amounts required by the state in which this statement is filed;
- iv) Are computed on the basis of assumptions
 consistent with those used in computing the
 corresponding items in the annual statement
 of the preceding year-end (with any excep tions noted below);
- v) Include provision for all actuarial reserves and related statement items which ought to be established.

NOTICE OF PROPOSED RULE

- The reserves and related items, when considered in light of the assets held by the company with contractual obligations and related expenses of make adequate provision, according to presently respect to such reserves and related actuarial considerations anticipated to be received and accepted actuarial standards of practice, for items including, but not limited to, the inretained under such policies and contracts, the anticipated cash flows required by the vestment earnings on such assets, and the the company. B)
- analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated by the Actuarial Standards Board, which standards form the basis of this state-The actuarial methods, considerations and ment of opinion. ົວ
- changes from the applicable date of the This opinion is updated annually as rerendering of this opinion which should be considered in reviewing this quired by statute. To the best of my knowledge, there have been no material annual statement to the date of the opinion; or į,
- occurred between the date of the statement for which this opinion is applicable and the date of this opinion should be The following material change(s) which considered in reviewing this opinion: (Describe the change or changes.) 11)
- to the date of this opinion is beyond the scope of this opinion. The analysis of asset adequaence may not follow all the assumptions used in recognizing that the company's future experi-The impact of unanticipated events subsequent cy portion of this opinion should be viewed the analysis. â

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Signature of Appointed Actuary

Address of Appointed Actuary

Telephone Number of Appointed Actuary"

Assumptions for New Issues ΰ

from a corresponding assumption used for prior new issues or new claims or other new liabilities is not a The adoption for new issues or new claims or other new liabilities of an actuarial assumption which differs change in actuarial assumptions within the meaning subsection (b)(6) above.

Adverse Opinions ਰ

then he or she shall refuse to issue a statement of actuarial opinion. If the appointed actuary's opinion is adverse or qualified, then he or she shall issue an adverse or qualified actuarial opinion explicitly stating the reason(s) for such opinion. This statement If the appointed actuary is unable to form an opinion, should follow the scope paragraph and precede the opinion paragraph.

Reliance on Data Furnished by Other Persons e

If the appointed actuary does not express an opinion as information, there shall be attached to the opinion the statement of a company officer or accounting firm who prepared such underlying data similar to the following: to the accuracy and completeness of the listings and summaries of policies in force and/or asset oriented

], and other liabili-"I [name of officer], [title], of [name of company or accounting firm], hereby affirm that the list-ings and summaries of policies and contracts in ties prepared for and submitted to [name of appointed actuary] were prepared under my direction and, to the best of my knowledge and belief, are substantially accurate and complete. force as of December 31, 19[

DEPARTMENT OF INSURANCE NOTICE OF PROPOSED RULE

Signature of the Officer of the Company or Account Firm

Address of the Officer of the Company or Accounting Firm

Telephone Number of the Officer of the Company, Accounting Firm or the Security Analyst"

DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Minimum Standards for Individual and Group Medicare Supplement Insurance
- 2) Code Citation: 50 Ill. Adm. Code 2008

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Proposed Action	Amended	Amended	Amended	Amended	Amended	Amended	Amended	Amended	Amended	Amended	Amended	Amended	Amended							
3) Section Numbers:	2008.70	2008.71	2008.72	2008.73	2008:80	2008.81	2008.90	2008.102	2008.103	Appendix C	Appendix D	_	Appendix F	Appendix G	Appendix H	Appendix I	Appendix J	Appendix K	Appendix L	Appendix M

- 4) Statutory Authority: Implementing Sections 363 and 363a and authorized by Section 401 of the Illinois Insurance Code (Ill. Rev. Stat. 1990 Supp., ch. 73, pars. 975 and 975a, as amended by P.A. 87-0601, effective September 18, 1991, and par. 1013).
- 5) A Complete Description of the Subjects and Issues Involved:
 The Department is initiating these amendments to correct
 technical and typographical errors. The Department has
 also undertaken a couple of substantive changes in order to
 comply with requirements established by the Federal Health
 Care Finance Administration from whom national
 certification is obtained.
- 6) Will this proposed rule replace emergency rule currently in effect? No
- 7) Does this rulemaking contain an automatic repeal date? No

DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

- Does this proposed amendment contain incorporations by reference 8
- Are there any other proposed amendments pending on this Part? 6
- Statement of Statewide Policy Objectives: This proposed amendment will not require a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues. 10
- comment on this proposed rulemaking: Persons who wish to comment on this proposed rulemaking may submit written comments no later than 45 days after the publication of Time, Place, and Manner in which interested persons may this Notice to: 11)

Department of Insurance 320 West Washington Springfield, Illinois 62767 Kirk H. Petersen

Initial Requiatory Flexibility Analysis: The Department has determined that these amendments will not affect small businesses. 12)

The full text of the Proposed Amendments begins on the next page:

Marine.

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

CHAPTER I: DEPARTMENT OF INSURANCE SUBCHAPTER z: ACCIDENT AND HEALTH INSURANCE TITLE 50: INSURANCE

PART 2008
MINIMUM STANDARDS FOR INDIVIDUAL AND GROUP
MEDICARE SUPPLEMENT INSURANCE

Authority	Purpose	Applicability and Scope		Policy Definitions and Terms	•	Benefit Conversion Requirements During Transition		Certificates Issued for Delivery Frior to the	Effective Date of this Part	rtificates	Issued or Delivered on or After the Effective Date	of this Part		Medicare Select Policies and Certificates	Open Enrollment	or Claims Payment	Loss Ratio Standards and Refund or Credit of	Premium	Filing and Approval of Policies and Certificates	and Premium Rates	Permitted Compensation Arrangements		Requirements for Application Forms and Replacement	Coverage		Appropriateness of Recommended Purchase and	Excessive Insurance		Prohibition Against Preexisting Conditions, Waiting	i Pr	Periods in Replacement Policies or Certificates	verabi	Effective Date (Repealed)	A Policy Checklist	æ	Page
Section 2008.10	2008.20	2008.30	2008.40	2008.50	2008.60	2008.61	2008.70			2008.71			2008.72	2008.73	2008.74	2008.75	2008.80		2008.81		2008.82	2008.90	2008.100		2008.101	2008.102		2008.103	2008.104			2008.110	2008.120	2008 APPENDIX	2008.APPEN	

COMFOH Plan J Plan Plan Plan Plan Plan Plan Plan Plan Plan Ö 2008.APPENDIX 2008.APPENDIX 2008.APPENDIX 2008.APPENDIX 2008.APPENDIX 2008.APPENDIX 2008.APPENDIX 2008.APPENDIX 2008.APPENDIX

2008.AFFENDIX M Notice to Applicant Regarding Replacement of 2008.AFFENDIX M Notice to Applicant Regarding Response-Other Accident and Sickness Insurance (Response-Other Fhan-Direct)

2008.APPENDIX N Medicare Supplement Refund Calculation Format 2008.APPENDIX 0 Notice of Medicare Changes 2008.APPENDIX P Medicare Supplement Policies Report AUTHORITY: Implementing Sections 363 and 363a and authorized by Section 401 of the Illinois Insurance Code (Ill. Rev. Stat. 1990 Supp., ch. 73, pars. 975 and 975a, as amended by P.A. 87-0601, effective September 18, 1991, and par. 1013).

SOUNCE: Adopted at 6 III. Reg. 7115, effective June 1, 1982; adopted at 6 III. Reg. 7115, effective January 1, 1983; codified at 7 III. Reg. 3474; emergency amendment at 13 III. Reg. 586, effective January 1, 1989, for a maximum of 150 days; amended at 13 III. Reg. 8520, effective May 23, 1989; amended at 14 III. Reg. 19243, effective November 27, 1990; amended at 16 III. Reg. 2766, effective February 11, 1992; corrected at 16 III. Reg. 3590; amended at 16 III. Reg. ., effective

Section 2008.70 Minimum Benefit Standards for Policies or Certificates Issued for Delivery Prior to the Effective Date of this Part The following standards are applicable to all Medicare supplement policies or certificates delivered or issued for delivery in this State prior to the effective date of this Part. No policy or certificate may be advertised, solicited or issued for delivery in this State as a Medicare supplement policy or certificate unless it meets or exceeds the following minimum standards. These are minimum standards and do not preclude the inclusion of other provisions or benefits which are not inconsistent with these standards.

a) General Standards.

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The following standards apply to Medicare supplement policies and certificates and are in addition to all other requirements of this Part.

- 1) A Medicare supplement policy or certificate shall not exclude or limit benefits for losses incurred more than six (6) months from the effective date of coverage because the losses involved a preexisting condition. The policy or certificate shall not define a preexisting condition more restrictively than a condition for which medical advice was given or treatment was recommended by or received from a physician within six (6) months before the effective date of coverage.
- A Medicare supplement policy or certificate shall not indemnify against losses resulting from sickness on a different basis than losses resulting from accidents.
- 3) A Medicare supplement policy or certificate shall provide that benefits designed to cover cost sharing amounts under Medicare will be changed automatically to coincide with any changes in the applicable Medicare deductible amount and copayment percentage factors. Premiums may be modified to correspond with such changes.
- 4) A "noncancellable," "guaranteed renewable," or "noncancellable and guaranteed renewable" Medicare supplement policy shall not:
- A) Provide for termination of coverage of a spouse solely because of the occurrence of an event specified for termination of coverage of the insured, other than the nonpayment of premium, or
- B) Be cancelled or nonrenewed by the issuer solely on the grounds of deterioration of health.
- 5) An insurer shall:
- A) Except as authorized by the Director of Insurance for this State, an issuer shall neither cancel nor nonrenew a Medicare supplement policy or certificate for any reason other than

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nonpayment of premium or material misrepresentation.

- B) If a group Medicare supplement insurance policy is terminated by the group policyholder and not replaced as provided in subsection (5)(D) below, the issuer shall offer certificate-holders an individual Medicare supplement policy. The issuer shall offer the certificate-cateholder at least the following choices:
- (i) an individual Medicare supplement policy currently offered by the issuer having comparable benefits to those contained in the terminated group Medicare supplement policy; and
- (ii) an individual Medicare supplement policy which provides only such benefits as are required to meet the minimum standards as defined in Section 2008.701(b) of this part.
- C) If a membership in a group is terminated, the issuer shall:
- (i) offer the certificateholder such conversion opportunities as are described in subsection (5)(B) above; or
- (ii) at the option of the group policyholder, offer the certificateholder continuation of coverage under the group policy.
- D) If a group Medicare supplement policy is replaced by another group Medicare supplement policy purchased by the same policyholder, the succeeding issuer shall offer coverage to all persons covered under the old group policy on its date of termination. Coverage under the new group policy shall not result in any exclusion for preexisting conditions that would have been covered under the group policy being replaced.
- Termination of a Medicare supplement policy or certificate shall be without prejudice to any

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continuous loss which commenced while the policy was in force, but the extension of benefits beyond the period the policy was in force may be predicated upon the continuous total disability of the insured, limited to the duration of the policy benefit period, if any, or to payment of the maximum benefits.

- b) Minimum Benefit Standards.
- 1) Coverage of Part A Medicare eligible expenses for hospitalization to the extent not covered by Medicare from the 61st day through the 90th day in any Medicare benefit period;
- Coverage for either all or none of the Medicare Part A inpatient hospital deductible amount;
- Coverage of Part A Medicare eligible expenses incurred as daily hospital charges during use of Medicare's lifetime hospital inpatient reserve days;
- 4) Upon exhaustion of all Medicare hospital inpatient coverage including the lifetime reserve days, coverage of ninety percent (90%) of all Medicare Part A eligible expenses for hospitalization not covered by Medicare subject to a lifetime maximum benefit of an additional 365 days;
- cost of the first three (3) pints of blood (or equivalent quantities of packed red blood cells, as defined under federal regulations) unless replaced in accordance with federal regulations or already paid for under Part B;
- 6) Coverage for the coinsurance amount of Medicare eligible expenses under Part B regardless of hospital confinement, subject to a maximum calendar year out-of-pocket amount equal to the Medicare Part B deductible [\$100] maximum-benefit.
- 7) Effective January 1, 1990, coverage under Medicare Part B for the reasonable cost of the first three (3) pints of blood (or equivalent quantities of packed red blood cells, as defined under federal

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dates or editions) unless replaced in accordance with federal regulations (42 CFR 409.87(b) 1988, no subsequent dates or editions) or already paid for regulations) (42 CFR 409.87(a) 1988, no subsequent under Part A, subject to the Medicare deductible amount.

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at 16	
Amended	
Source:	

Section 2008.71 Benefit Standards for Policies or Certificates Issued or Delivered on or after the Effective Date of this Part

The following standards are applicable to all Medicare supplement policies or certificates delivered or issued for delivery in this State on or after the effective date of this Part. No policy or certificate may be advertised, solicited, delivered or issued for delivery in this State as a Medicare supplement policy or certificate unless it complies with these benefit standards.

General Standards а Э

The following standards apply to Medicare supplement policies and certificates and are in addition to all other requirements of this Part.

- define a preexisting condition more restrictively than a condition for which medical advice was given or treatment was recommended by or received from a more than six (6) months from the effective date of coverage because the losses involved a preexisting A Medicare supplement policy or certificate shall not exclude or limit benefits for losses incurred physician within six (6) months before the effeccondition. The policy or certificate may not tive date of coverage. 7
- not indemnify against losses resulting from sickness on a different basis than losses resulting A Medicare supplement policy or certificate shall from accidents. 2
- ing amounts under Medicare will be changed automatprovide that benefits designed to cover cost shar-A Medicare supplement policy or certificate shall ically to coincide with any changes in the 3)

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applicable Medicare deductible amount and copayment Premiums may be modified to correspond with such changes. factors. percentage

- an event speci-No Medicare supplement policy or certificate shall fied for termination of coverage of the insured, provide for termination of coverage of a spouse other than the nonpayment of premium. solely because of the occurrence of 4
- guaranteed Each Medicare supplement policy shall be renewable; and 2
- or nonrenew the of health status of policy solely on the ground cancel The issuer shall not the individual; and A A
- policy for any reason other than nonpayment of The issuer shall not cancel or nonrenew the premium or material misrepresentation. B)
- If the Medicare supplement policy is terminated by the group policyholder and is not replaced as provided under Section 2008.71(a)(5)(E), the issuer shall offer certificateholders an indi-Medicare supplement policy which (at the option of the certificateholder): vidual ົວ
- (i) Provides for continuation of the benefits contained in the group policy, or
- meet the requirements of this subsection. (ii) Provides for such benefits as otherwise
- group Medicare supplement policy and the individual terminates membership in the group, the If an individual is a certificateholder in issuer shall: â
- (i) Offer the certificateholder the conversion opportunity described in Section 2008.71(a)(5)(C), or
- At the option of the group policyholder, offer the certificateholder continuation of coverage under the group policy. (11)

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- for preexisting conditions that would have been placed by another group Medicare supplement policy purchased by the same policyholder, the covered under the group policy being replaced. succeeding issuer shall offer coverage to all persons covered under the old group policy on Coverage under the new policy shall not result in any exclusion If a group Medicare supplement policy is reits date of termination. (H
- the period during which the policy was in force may be conditioned upon the continuous total disability of the insured, limited to the duration of the policy benefit period, if any, or payment of the was in force, but the extension of benefits beyond Termination of a Medicare supplement policy or certificate shall be without prejudice to any continuous loss which commenced while the policy maximum benefits. 9
- A Medicare supplement policy or certificate shall provide: 2
- mined to be entitled to medical assistance under Title XIX of the Social Security Act, but only if the policyholder or certificateholder cate within ninety (90) days after the date the individual becomes entitled to such assistance. Upon receipt of notice, the issuer shall return to the policyholder or certificateholder that certificateholder has applied for and is deternotifies the issuer of such policy or certifi-That benefits and premiums under the policy or certificate shall be suspended at the request of the policyholder or certificateholder for period of Medicaid eligibility, subject to portion of the premium attributable to the the period (not to exceed twenty-four (24) months) in which the policyholder or adjustment for paid claims. A
- certificate shall be automatically reinstituted (effective as of the date of termination of such entitlement) as of the termination of such holder or certificateholder loses entitlement If such suspension occurs and if the policyto such medical assistance, such policy or B

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entitlement if the policyholder or certificateholder provides notice of loss of such entitlesuch loss and pays the premium attributable to ment within ninety (90) days after the date of the period, effective as of the date of termination of such entitlement.

- Reinstitution of such coverages: ົວ
- (i) Shall not provide for any waiting period with respect to treatment of preexisting conditions;
- stantially equivalent to coverage in effect before the date of such suspension; and Shall provide for coverage which is sub-(11)
- certificateholder had the coverage not been Shall provide for classification of premiums on terms at least as favorable to the policyholder or certificateholder as the premium classification terms that would have applied to the policyholder or suspended. (iii) No.
- Standards for Basic ("Core") Benefits Common to All Benefit Plans â

Medicare Supplement Insurance Benefit Plans in addition cate including only the following basic "core" package of benefits to each prospective insured. An issuer may make available to prospective insureds any of the other Every issuer shall make available a policy or certifito the basic "core" package, but not in lieu thereof.

- hospitalization to the extent not covered by Medicare from the 61st day through the 90th day in Eny Coverage of Part A Medicare Eligible Expenses for Medicare benefit period; 1
- covered by Medicare for each Medicare lifetime Coverage of Part A Medicare Eligible Expenses incurred for hospitalization to the extent not inpatient reserve day used; 5
- Upon exhaustion of the Medicare hospital inpatient coverage including the lifetime reserve days, 3

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coverage of the Medicare Part A eligible expenses for hospitalization paid at the Diagnostic Related Group (DRG) day outlier per diem or other appropriate standard of payment, subject to a lifetime maximum benefit of an additional 365 days;

- 4) Coverage under Medicare Parts A and B for the reasonable cost of the first three (3) pints of blood (or equivalent quantities of packed red blood cells, as defined under federal regulations) unless replaced in accordance with federal regulations;
- 5) Coverage for the coinsurance amount of Medicare Eligible Expenses under Part B regardless of hospital confinement, subject to the Medicare Part B deductible.
- c) Standards for Additional Benefits

The following additional benefits shall be included in Medicare Supplement Benefit Plans "B" through "J" only as provided by Section 2008.72 of this Part.

- Medicare Part A Deductible: Coverage for all of the Medicare Part A inpatient hospital deductible amount per benefit period.
- 2) Skilled Nursing Facility Care: Coverage for the actual billed charges up to the coinsurance amount from the 21st day through the 100th day in a Medicare benefit period for posthospital skilled nursing facility care eligible under Medicare Part A.
- Medicare Part B Deductible: Coverage for all of the Medicare Part B deductible amount per calendar year regardless of hospital confinement.
- 4) Eighty Percent (80%) of the Medicare Part B Excess Charges: Coverage for eighty percent (80%) of the difference between the actual Medicare Part B charge as billed, not to exceed any charge limitation established by the Medicare program or state law, and the Medicare-approved Part B charge.
- 5) One Hundred Percent (100%) of the Medicare Part B Excess Charges: Coverage for all of the difference between the actual Medicare Part B charge as

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billed, not to exceed any charge limitation established by the Medicare program or State law, and the Medicare-approved Part B charge.

- 6) Basic Outpatient Prescription Drug Benefit: Coverage for fifty percent (50%) of outpatient prescription drug charges, after a two hundred fifty dollar (\$250) calendar year deductible, to a maximum of one thousand two hundred fifty dollars (\$1,250) in benefits received by the insured per calendar year, to the extent not covered by Medicare.
- 7) Extended Outpatient Prescription Drug Benefit:
 Coverage for fifty percent (50%) of outpatient
 prescription drug charges, after a two hundred
 fifty dollar (\$250) calendar year deductible to a
 maximum of three thousand dollars (\$3,000) in
 benefits received by the insured per calendar year,
 to the extent not covered by Medicare.
- Country: Coverage to the extent not covered by Medicare for eighty percent (80%) of the billed charges for Medicare-eligible expenses for medical-charges for medical-er received in a foreign country, which care would have been covered by Medicare if provided in the United States and which care began during the first sixty (60) consecutive days of each trip outside the United States, subject to a calendar year deductible of two hundred fifty dollars (\$250), and a lifetime maximum benefit of fifty thousand dollars (\$50,000). For purposes of this. benefit, "emergency care" shall mean care needed immediately because of an injury or illness of sudden and unexpected onset.
- 9) Preventive Medical Care Benefit: Coverage for the following preventive health services:
- A) An annual clinical preventive medical history and physical examination that may include tests and services from subsection (B) below and patient education to address preventive health care measures.

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- preventive screening tests or preventive services, the frequency of which is considered Any one or a combination of the following medically appropriate: B)
- (i) Fecal occult blood test and/or digital rectal examination;
- (11) Mammogram;
- (111) Dipstick urinalysis for hematuria, bacteriuria and proteinauria;
- test, administered or ordered by a physi-Pure tone (air only) hearing screening cian; (<u>7</u>)
- Serum cholesterol screening (every five (5) years); 3
- (vi) Thyroid function test;
- (vii) Diabetes screening.
- Influenza vaccine administered at any appropri-Diphtheria booster (every ten (10) years). ate time during the year and Tetanus and ົວ
- Any other tests or preventive measures deter-mined appropriate by the attending physician. â
- Medicare were to cover the service as identi-Reimbursement shall be for the actual charges Procedural Terminology (AMA CPT) codes, to a maximum of one hundred twenty dollars (\$120) annually under this benefit. This benefit up to one hundred (100) percent of the Medi-care-approved amount for each service, as if fled in American Medical Association Current shall not include payment for any procedure covered by Medicare. Ω Ω
- At-Home Recovery Benefit: Coverage for services to provide short term, at-home assistance with activities of daily living for those recovering from an illness, injury or surgery. 9

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- For purposes of this benefit, the following definitions shall apply: R
- (1) "Activities of daily living" include, but are not limited to, bathing, dressing, personal hygiene, transferring, eating, ambulating, assistance with drugs that are normally self-administered, and changing bandages or other dressings
- (JCAHO); -or-the-National-beague-for-Nursing requires a duly qualified or licensed home health aide/homemaker, personal care aide płoyed-by-an-organization-that-is-a-Medi-care-certified-home-health-agency;-and-is accredited-through-a-national-accrediting organization-such-as-the-Joint-Commission or nurse provided through a licensed home censed referral agency or licensed nurses registry. on-Accreditation-of-Health-Organizations (NEN) 7-or-the-National-Home-Care-Council (NHCC); -and-is-licensed-where-state-law "Care provider" means an-individual-emhealth care agency or referred by a li (11)
- that such place would qualify as a resi-dence for home health care services covered by Medicare. A hospital or skilled nursing "Home" shall mean any place used by the insured as a place of residence, provided facility shall not be considered the insured's place of residence. (111)
- tion of the visit, except each consecutive 4 hours in a 24-hour period of services of a visit required to provide at home recovery care, without limit on the dura-"At-home recovery visit" means the period provided by a care provider is one visit. (14)
- Coverage Requirements and Limitations (A
- (1) At-home recovery services provided must be primarily services which assist in activities of daily living.

DEFENTION OF THEORYCE

NOTICE OF PROPOSED AMENDMENTS (ii) The insured's attending physician must certify that the specific type and frequency of at-home recovery services are necessary because of a condition for which a home care plan of treatment was approved by

(iii) Coverage is limited to:

Medicare.

No more than the number and type of at-home recovery visits certified as necessary by the insured's attending physician. The total number of at-home recovery visits shall not exceed the number of Medicare approved home health care visits under a Medicare approved Home Care Plan of Treatment.

The actual charges for each visit up to a maximum reimbursement of forty dollars (\$40) per visit.

One thousand six hundred dollars (\$1,600) per calendar year.

Seven (7) visits in any one week.

Care furnished on a visiting basis in the insured's home.

Services provided by a care provider as defined in this Section.

At-home recovery visits while the insured is covered under the policy or certificate and not otherwise excluded.

At-home recovery visits received during the period the insured is receiving Medicare approved home care services or no more than eight (8) weeks after the service date of the last Medicare approved home health care visit.

C) Coverage is excluded for:

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- Home care visits paid for by Medicare or other government programs; and
- (ii) Care provided by family members, unpaid volunteers or providers who are not care providers.
- the prior approval of the Director, offer policies or certificates with new or innovative benefits in addition to the benefits provided in a policy or certificate that otherwise complies with the applicable standards. Such benefits may include benefits that are appropriate to Medicare supplement insurance new or innovative, not otherwise available, cost-effective, and offered in a manner which is consistent with the goal of simplification of Medicare supplement policies.

Source: Amended at 16 Ill. Reg. , effective

Section 2008.72 Standard Medicare Supplement Benefit Plans

- a) An issuer shall make available to each prospective policyholder and certificateholder a policy form or certificate form containing only the basic "core" benefits, as defined in Section 2008.71 of this Part.
- b) No groups, packages or combinations of Medicare supplement benefits other than those listed in this Section shall be offered for sale in this State, except as may be permitted in Sections 2008.71(c)(11) and 2008.73 of this Part.
- designation and format to the standard benefit plans listed in Appendix-B <u>Section 2008.72(e)</u> and conform to the definitions in Section 2008.40 of this Part. Each benefit shall be structured in accordance with the format provided in Sections 2008.71 (b) and (c) and list the benefits in the order shown in Appendix B. For purposes of this Section, "structure, language, and format" means style, arrangement and overall content of a benefit.

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designations required in subsection (c) above, other An issuer may use, in addition to the benefit plan designations to the extent permitted by law.

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Make-up of benefit plans: •

- shall be limited to the Basic ("Core") Benefits Common to all Benefit Plans, as defined in Section 2008.71(b) of this Part. Standardized Medicare supplement benefit plan "A" 7
- Standardized Medicare supplement benefit plan "B" shall include only the following: The Core Benefit as defined in Section 2008.71(b) of this Part, plus the Medicare Part A Deductible as defined in Section 2008.71(c)(1). 5
- Standardized Medicare supplement benefit plan "C" shall include only the following: The Core Benefit as defined in Section 2008.71(b) of this Part, plus the Medicare Part A Deductible, Skilled Nursing Country as defined in Sections 2008.71(c)(1), (2), Medically Necessary Emergency Care in a Foreign Facility Care, Medicare Part B Deductible and (3) and (8) respectively. 3
- Standardized Medicare supplement benefit plan "D" shall include only the following: The Core Benefit as defined in Section 2008.71(b) of this Part, plus the Medicare Part A Deductible, Skilled Nursing Benefit as defined in Sections 2008.71(c)(1), (2), Facility Care, Medically Necessary Emergency Care in a Foreign Country and the At-Home Recovery (8) and (10) respectively. 7
- Standardized Medicare supplement benefit plan "E" shall include only the following: The Core Benefit as defined in Section 2008.71(b) of this Part, plus the Medicare Part A Deductible, Skilled Nursing Facility Care, Medically Necessary Emergency Care in a Foreign Country and Preventive Medical Care as defined in Sections 2008.71(c)(1), (2), (8) and (9) respectively. ŝ
- shall include only the following: The Core Benefit as defined in Section 2008.71(b) of this Part, plus Standardized Medicare supplement benefit plan "F" 9

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the Medicare Part A Deductible, the Skilled Nursing Facility Care, the Part B Deductible, One Hundred Percent (100%) of the Medicare Part B Excess Charges, and Medically Necessary Emergency Care in a Foreign Country as defined in Sections 2008.71(c)(1), (2), (3), (5) and (8) respectively.

- Facility Care, Eighty Percent (80%) of the Medicare Part B Excess Charges, Medically Necessary Emergen-cy Care in a Foreign Country, and the At-Home Recovery Benefit as defined in Sections shall include only the following: The Core Benefit as defined in Section 2008.71(b) of this Part, plus the Medicare Part A Deductible, Skilled Nursing 2008.71(c)(1), (2), (4), (8) and (10) respectively. Standardized Medicare supplement benefit plan "G" 2
- shall consist of only the following: The Core Benefit as defined in Section 2008.71(b) of this Part, plus the Medicare Part A Deductible, Skilled Nursing Facility Care, Basic Prescription Drug Benefit and Medically Necessary Emergency Care in Foreign Country as defined in Sections Standardized Medicare supplement benefit plan "H" 2008.71(c)(1), (2), (6) and (8) respectively. 6
- Standardized Medicare supplement benefit plan "I" shall consist of only the following: The Core Benefit as defined in Section 2008.71(b) of this Part, plus the Medicare Part A Deductible, Skilled Nursing Facility Care, one Hundred Percent (1004) of the Medicare Bexcess Charges, Basic Prescription Drug Benefit, Medically Necessary Emergency Care in a Foreign Country and At-Home Recovery Benefit as defined in Sections 2008.71(c)(1), (2), (5), (6), (8) and (10) respectively. 6
- Excess Charges, Extended Prescription Drug Benefit, Part, plus the Medicare Part A Deductible, Skilled Nursing Facility Care, Medicare Part B Deductible, One Hundred Percent (100%) of the Medicare Part B Standardized Medicare supplement benefit plan "J" shall consist of only the following: The Core Benefit as defined in Section 2008.71(b) of this Medically Necessary Emergency Care in a Foreign Country, Preventive Medical Care and At-Home 10)

Recovery Benefit as defined in Sections 2008.71(c)(1), (2), (3), (5), (7), (8), (9) and (10) respectively.

Amended at 16 Ill. Reg.

Section 2008.73 Medicare Select Policies and Certificates

- a) This Section shall apply to Medicare Select policies and certificates, as defined in this Section. The State of Illinois has not been chosen as a Medicare Select State; therefore, the provisions of this Section do not apply to Illinois Medicare policies or certificates. No policy or certificate may be advertised as a Medicare Select policy or certificate unless it meets the requirements of this Section.
- b) For the purposes of this Section:
- "Complaint" means any dissatisfaction expressed by an individual concerning a Medicare Select issuer or its network providers.
- 2) "Grievance" means dissatisfaction expressed in writing by an individual insured under a Medicare Select policy or certificate with the administration, claims practices, or provision of services concerning a Medicare Select issuer or its network providers.
- "Medicare Select issuer" means an issuer offering, or seeking to offer, a Medicare Select policy or certificate.
- 4) "Medicare Select policy" or "Medicare Select certificate" mean respectively a Medicare supplement policy or certificate that contains restricted network provisions.
- 5) "Network provider" means a provider of health care, or a group of providers of health care, which has entered into a written agreement with the issuer to provide benefits insured under a Medicare Select policy.

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- 6) "Restricted network provision" means any provision which conditions the payment of benefits, in whole or in part, on the use of network providers.
- "Service area" means the geographic area approved by the Director within which an issuer is authorized to offer a Medicare Select policy.
- c) The Director of Insurance may authorize an issuer to offer a Medicare Select policy or certificate, pursuant to this Section and Section 4358 of the Omnibus Budget Reconciliation Act (OBRA) of 1990 if the Director finds that the issuer has satisfied all of the requirements of this Part.
- d) A Medicare Select issuer shall not issue a Medicare Select policy or certificate in this State until its plan of operation has been approved by the Director of Insurance.
- e) A Medicare Select issuer shall file a proposed plan of operation with the Director of Insurance in a format prescribed by the Director. The plan of operation shall contain at least the following information:
- Evidence that all covered services that are subject to restricted network provisions are available and accessible through network providers, including a demonstration that:
- A) Such services can be provided by network providers with reasonable promptness with respect to geographic location, hours of operation and after-hour care. The hours of operation and availability of after-hour care shall reflect usual practice in the local area. Geographic availability shall reflect the usual travel times within the community.
- B) The number of network providers in the service area is sufficient, with respect to current and expected policyholders, either:
- (i) To deliver adequately all services that are subject to a restricted network provision; or

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(ii) To make appropriate referrals.

- providers describing specific responsibilities. There are written agreements with network ົວ
- Emergency care is available twenty-four (24) hours per day and seven (7) days per week. â
- provided on a prepaid basis, there are written agreements with network providers prohibiting such providers from billing or otherwise seekject to a restricted network provision and are ing reimbursement from or recourse against any This subsection shall coinsurance amounts as stated in the Medicare In the case of covered services that are subindividual insured under a Medicare Select not apply to supplemental charges or Select policy or certificate. policy or certificate. (i)
- of statement or map providing a clear description the service area. K 5
- þe description of the grievance procedure to A descriputilized. 3)
- A description of the quality assurance program, including: 4
- The formal organizational structure; Ā
- retention and removal of network providers; and The written criteria for selection, B)
- provided by network providers, and the process The procedures for evaluating quality of care corrective action when warranted. to initiate ΰ
- list and description, by specialty, of the network providers. Ø 2
- Copies of the written information proposed to be used by the issuer to comply with subsection (1) hereunder. (9
- Any other information requested by the Director of Insurance 7

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- A Medicare Select issuer shall: f)
- ers, with the Director prior to implementing such changes. Such changes shall be considered approved File any proposed changes to the plan of operation, except for changes to the list of network providby the Director after thirty (30) days unless specifically disapproved. 7
- An updated list of network providers shall be filed with the Director of Insurance at least quarterly. 6
- restrict payment for covered services provided by non-network providers if: <u>б</u>
- The services are for symptoms requiring emergency care or are immediately required for an unforeseen illness, injury or a condition; and 7
- It is not reasonable to obtain such services through a network provider. 5
- services that are not available through network providpayment for full coverage under the policy for covered A Medicare Select policy or certificate shall provide 'n
- A Medicare Select issuer shall make full and fair disclosure in writing of the provisions, restrictions, and limitations of the Medicare Select policy or certificate to each applicant. This disclosure shall include at least the following: į,
- applicant to compare the coverage and premiums of the Medicare Select policy or certificate with: An outline of coverage sufficient to permit the 7
- Other Medicare supplement policies or certificates offered by the issuer; and A
- Other Medicare Select policies or certificates, B)
- hours of operation) of the network providers, including primary care physicians, specialty physi-A description (including address, phone number and cians, hospitals, and other providers 5

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- A description of the restricted network provisions, including payments for coinsurance and deductibles when providers other than network providers are utilized. 3)
- emergency and urgently needed care and other out of service area cover-A description of coverage for 4)
- stricted network providers and to other providers. A description of limitations on referrals to re-2)
- A description of the policyholder's right to purchase any other Medicare supplement policy or certificate otherwise offered by the issuer. 9
- grievance procedure. A description of the Medicare Select issuer's quality assurance program and 7
- the applicant a signed and dated form stating that the applicant has received the information provided pursu-Prior to the sale of a Medicare Select policy or certificate, a Medicare Select issuer shall obtain from ant to subsection (i) above and that the applicant understands the restrictions of the Medicare Select policy or certificate. 7
- for hearing complaints and resolving written grievances from the subscribers. Such procedures shall be aimed A Medicare Select issuer shall have and use procedures from the subscribers. Such procedures shall be air at mutual agreement for settlement and may include arbitration procedures. ∽
- The grievance procedure shall be described in the policy and certificates and in the outline of coverage. 1
- At the time the policy or certificate is issued, the issuer shall provide detailed information to the policyholder describing how a grievance may be registered with the issuer. 5
- and shall be transmitted to decisionmakers who have authority to investigate the issue and take correc-Grievances shall be considered in a timely manner tive action. 3)

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- If a grievance is found to be valid, corrective action shall be taken promptly. 4
- All concerned parties shall be notified about the results of a grievance. 2
- its grievance procedure. The report shall be in a format prescribed by the Director and shall contain the number of grievances filed in the past year and a summary of the subject, nature and resolution of March 31st to the Director of Insurance regarding The issuer shall report no later than each such grievances. (9
- Medicare Select policy or certificate the opportunity to purchase any Medicare supplement policy or certifiissuer shall make available to each applicant for a At the time of initial purchase, a Medicare Select cate otherwise offered by the issuer. 7
- tain a restricted network provision. The issuer shall make such policies or certificates available without requiring evidence of insurability after the Medicare supplement policy or certificate has been in force for care Select policy or certificate, a Medicare Select issuer shall make available to the individual insured policy or certificate offered by the issuer which has comparable or lesser benefits and which does not con-At the request of an individual insured under a Medithe opportunity to purchase a Medicare supplement six (6) months. E
- supplement policy or certificate will be considered contains one or more significant benefits not included in the Medicare Select policy or certifito have "comparable or lesser" benefits unless it For the purposes of this subsection, a Medicare cate being replaced. 7
- For the purposes of this subsection, a "significant deductible, coverage for prescription drugs, coverage for at-home recovery services or coverage for benefit" means coverage for the Medicare Part A Part B excess charges. 5
- Medicare Select policies and certificates shall provide for continuation of coverage in the event the Secretary <u>د</u>

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of Health and Human Services determines that Medicare this Section should be discontinued due to either the failure of the Medicare Select Program to be reauthorized under law or its substantial amendment. Select policies and certificates issued pursuant to

- Each Medicare Select issuer shall make available to stricted network provision. The issuer shall make such policies and certificates available without policy or certificate the opportunity to purchase any Medicare supplement policy or certificate offered by the issuer which has comparable or lesser benefits and which does not contain a reeach individual insured under a Medicare Select requiring evidence of insurability. 1
- supplement policy or certificate will be considered to have "comparable or lesser" benefits unless it included in the Medicare Select policy or certificate being replaced. For the purposes of this subsection, a "significant benefit" means coverage prescription drugs, coverage for at-home recovery for the Medicare Part A deductible, coverage for For the purposes of this subsection, a Medicare services or coverage for Part B excess charges. contains one or more significant benefits not 5
- A Medicare Select issuer shall comply with requests for data made by state or federal agencies, including the United States Department of Health and Human Services, for the purpose of evaluating the Medicare Select 6

effective
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at
Amended
Source:

Section 2008:80 Loss Ratio Standards and Refund or Credit of Premium Pursuant to Section 4355 of the Omnibus Budget Reconciliation Act (OBRA) of 1990 (P.L. 101-508) and Section 363a of P.A. 87-0601 the requirements of this subsecdelivered or issued for delivery unless the policy form or certificate form can be expected, as estimated for tion are effective November 5, 1991. A Medicare supplement policy form or certificate form shall not be the entire period for which rates are computed to a

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under the policy form or certificate form, on the basis of incurred claims experience or incurred health care not including anticipated refunds or credits) provided expenses, as appropriate, and earned premiums for such period and in accordance with accepted actuarial princertificateholders in the form of aggregate benefits provide coverage, to return to policyholders and ciples and practices:

- At least 75% of the aggregate amount of premiums earned in the case of group policies; or 1
- At least 65% of the aggregate amount of premiums earned in the case of individual policies. 2)
- entire future period for which the revised rates are computed to provide coverage can be expected to date. Filings of rate revisions shall also demonpremiums comply with the requirements of this Section when combined with actual experience to All filings of rates and rating schedules shall demonstrate that expected claims in relation to strate that the anticipated loss ratio over the meet the appropriate loss ratio standards. 3
- For purposes of applying subsection (a) of this Section and Section 2008.81(c)(2), policies issued as a result of solicitations of individuals through the mails or by mass media advertising (including both print and broadcast advertising) shall be deemed to be individual policies. 4

Refund or Credit Calculation Q

- by May 31 of each year the data contained in Appendix BN for each type in a standard Medicare supple-An issuer shall collect and file with the Director ment benefit plan. 7
- on the basis of the experience as reported, the (ratio 3), then a refund or credit calculation is required. The refund calculation shall be done on a statewide basis for each type in a standard of benchmark ratio since inception (ratio 1) exceeds For purposes the refund or credit calculation, experience on the adjusted experience ratio since inception Medicare supplement benefit plan. 5

NOTICE OF PROPOSED AMENDMENTS

policies issued within the reporting year shall be excluded.

A refund or credit shall be made only when the benchmark loss ratio exceeds the adjusted experience loss ratio and the amount to be refunded or credited exceeds a de minimis level. Such refund shall include interest from the end of the calendar year to the date of the refund or credit at a rate specified by the Secretary of Health and Human Services, but in no event shall it be less than the average rate of interest for 13-week Treasury notes. A refund or credit against premiums due shall be made by September 30 following the experience year upon which the refund or credit is based.

c) Annual Filing of Premium Rates

dards of practice using reasonable assumptions, that the appropriate loss ratio standards can be expected to be met over the entire period for which rates are computed. Such demonstration shall exclude active life rating schedule and supporting documentation including ratios of incurred losses to earned premiums by policy with the filing requirements and procedures prescribed An issuer of Medicare supplement policies and certificates issued in this State before or after the effective date of this Part shall file annually its rates, An expected third-year loss ratio which is shall be demonstrated for policies or certificates in also demonstrate, in accordance with actuarial stan-The supporting documentation shall duration for approval by the Director in accordance greater than or equal to the applicable percentage force less than three (3) years. by the Director. reserves.

- d) As soon as practicable, but prior to the effective date of enhancements in Medicare benefits, every issuer of Medicare supplement policies or certificates in this State shall file with the Department:
- 1) Appropriate premium adjustments necessary to produce loss ratios as anticipated for the current premium for the applicable policies or certificates. Such supporting documents as are necessary to justify the adjustment shall accompany the filling.

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- 2) An issuer shall make such premium adjustments as are necessary to produce an expected loss ratio under such policy or certificate as will conform with minimum loss ratio standards for Medicare supplement policies and which are expected to result in a loss ratio at least as great as that originally anticipated in the rates used to produce current premiums by the issuer for such Medicare supplement policies or certificates. No premium adjustment which would modify the loss ratio experience under the policy other than the adjustments described herein shall be made with respect to a policy at any time other than upon its renewal date or anxiversary date.
- 3) If an issuer fails to make premium adjustments acceptable to the Director, the Director may order premium adjustments, refunds or premium credits deemed necessary to achieve the loss ratio required by this Section.
- 4) Any appropriate riders, endorsements or policy forms needed to accomplish the Medicare supplement policy or certificate modifications necessary to eliminate benefit duplications with Medicare. Such riders, endorsements or policy forms shall provide a clear description of the Medicare supplement benefits provided by the policy or certificate.

e) Public Hearings

The Director may conduct a public hearing to gather information concerning a request by an issuer for an increase in a rate for a policy form or certificate form issued before or after the effective date of this Part if the experience of the form for the previous reporting period is not in compliance with the applicable loss ratio standard. The determination of compliance is made without consideration of any refund or credit for such reporting period.

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Section 2008.81 Filing and Approval of Policies and Certificates and Premium Rates

NOTICE OF PROPOSED AMENDMENTS

- An issuer shall not deliver or issue for delivery a policy or certificate to a resident of this State unless the policy form or certificate form has been filed with and approved by the Director. a)
- An issuer shall not use or change premium rates for a Medicare supplement policy or certificate unless the rates, rating schedule and supporting documentation have been filed with and approved by the Director. (q
- shall not file for approval more than one form of a policy or certificate of each type for each standard Medicare supplement benefit plan. Except as provided in subsection (c)(1), an issuer ΰ
- standard Medicare supplement benefit plan, one for Director, up to four additional policy forms or certificate forms of the same type for the same An issuer may offer, with the approval of the each of the following cases: 1
- The inclusion of new or innovative benefits; æ
- ö The addition of either direct response producer marketing methods; B
- The addition of either guaranteed issue or underwritten coverage; ົວ
- The offering of coverage to individuals eligible for Medicare by reason of disability. ô
- For the purposes of this Section, a "type" means an individual policy, a group policy, an individual Medicare Select policy, or a group Medicare Select policy. 6
- issuer has actively offered it for sale in the previous shall continue to make available for purchase any policy form or certificate form issued after the effec-Director. A policy form or certificate form shall not be considered to be available for purchase unless the Except as provided in subsection (1) below, an issuer tive date of this Part that has been approved by the twelve months. ō

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- least 30 days prior to discontinuing the availabilprovides to the Director in writing its decision After receipt of the notice by the Director, the issuer shall no longer offer for sale the policy An issuer may discontinue the availability of a policy form or certificate form if the issuer ity of the form of the policy or certificate. form or certificate form in this State. 7
- policy form or certificate form pursuant to subsection (1) above shall not file for approval a new for the same standard Medicare supplement benefit plan as the discontinued form for a period of five An issuer that discontinues the availability of a policy form or certificate form of the same type determines that a shorter period is appropriate. The period of years after the issuer provides notice to the discontinuance may be reduced if the Director Director of the discontinuance. 5
- discontinuance for the purposes of this subsection. The sale or other transfer of Medicare supplement business to another issuer shall be considered 3)
- A change in the rating structure or methodology shall be considered a discontinuance under subsection (d)(1) and (2) unless the issuer complies with the following requirements: 4
- The issuer provides an actuarial memorandum, in rating methodology and resultant rates differ from the existing rating methodology and resula form and manner prescribed by the Director, describing the manner in which the revised tant rates. A A
- would cause the percentage differential between The issuer does not subsequently put into effect a change of rates or rating factors that scribed in the actuarial memorandum to change. The Director may approve a change to the difthe discontinued and subsequent rates as deferential which is in the public interest. B
- Except as provided herein, the experience of all policy forms or certificate forms of the same type in a standard Medicare supplement benefit plan shall be combined e

NOTICE OF PROPOSED AMENDMENTS

scribed in Section 2008.280. Forms assumed under an assumption reinsurance agreement shall not be combined with the experience of other forms for purposes of the for purposes of the refund or credit calculation prerefund or credit calculation.

, effective Amended at 16 Ill. Reg. (Source:

Required Disclosure Provisions

General Rules a)

Section 2008.90

Medicare supplement policies and certificates shall Such provision shall be appropriately captioned and shall appear on the first page of the policy and shall include any reservation by the issuer of the right to change premiums and any automatic renewal premium increases based on the policyholder's age. include a renewal or continuation provision. The language or specifications of such provision must be consistent with the type of contract issued. <u>,</u>

in premium during the policy term shall, unless the issuer effectuates a request made in writing by the insured or exercises a specifically reserved right under a Medicare supplement policy, or is required to reduce or eliminate benefits to avoid duplicabenefits are required by the minimum standards for date of issue or at reinstatement or renewal which benefits or coverage with an accompanying increase Where a separate additional premium is charged for policy shall require signed acceptance by the insured. After the date of policy or certificate tion of Medicare benefits, all riders or endorsements added to a Medicare supplement policy after writing signed by the insured, except if the increased benefits or coverage is required by law. reduce or eliminate benefits or coverage in the issue, any rider or endorsement which increases endorsements, such premium charge shall be set Except for riders or endorsements by which the benefits provided in connection with riders or Medicare supplement policies, be agreed to in 5

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NOTICE OF PROPOSED AMENDMENTS

- Medicare supplement policies or certificates shall payment of benefits based on "reasonable and customary," or words of similar standards described as "usual and customary, not provide for the
- contains any limitations with respect to preexist-ing conditions, such limitations shall appear as a separate paragraph of the policy and be labeled as "Preexisting Condition Limitations." If a Medicare supplement policy or certificate 4)
- have a notice prominently printed on the first page of the policy or attached thereto stating in sub-Medicare supplement policies and certificates shall stance that the policyholder or certificateholder shall have the right to return the policy or certificate within thirty (30) days of its delivery and to have the premium refunded directly to him policy or certificate, the insured person is not her in a timely manner if, after examination satisfied for any reason. 2
- other than incidentally, to a person(s) eligible for Medicare by reason of age shall provide to such applicants a "buyer's guide" approved by the Director of Insurance and in type size no smaller than tificates which provide hospital or medical expense coverage on an expense incurred or indemnity basis, 12 point type. Delivery of the "buyer's guide" shall be made whether or not such policies or certificates are advertised, solicited or issued as Medicare supplement policies or certificates as defined in this Part. Except in the case of direct Direct response issuers shall deliver the "buyer's guide" to the applicant upon request but not later application and acknowledgement of receipt of the response issuers, delivery of the "buyer's guide" shall be made to the applicant at the time of Issuers of accident and sickness policies or cer-"buyer's guide" shall be obtained by the issuer. than at the time the policy is delivered. 9

Policy Checklist Q Q

In order to determine what policy is appropriate and nonduplicative, a policy checklist must be 1

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NOTICE OF PROPOSED AMENDMENTS

point of sale. Copies of the checklist, completed and duly signed are to be provided to the applicant This requirement does not apply to completed in the presence of the applicant at the direct response solicitations. and the issuer.

- The checklist required by (b)(1) above shall provide substantially the form prescribed in Appendix 5
- Issuers issuing Medicare supplement policies for delivery in this State shall not issue a Medicare supplement policy unless all information requested in the policy checklist is provided. 3

Notice Requirements ິບ

- notify its policyholders and certificateholders of modifications it has made to Medicare supplement insurance policies or certificates in the format As soon as practicable, but no later than thirty (30) days prior to the annual effective date of prescribed in Appendix EO. Such notice shall: Medicare benefit changes, every insurer shall î
- under the Medicare supplement policy or certif-Medicare program and a description of each modification made to the coverage provided Include a description of revisions to the A)
- as to when any premium adjustment is to be made due to changes in Medicare. Inform each policyholder or certificateholder B)
- The notice of benefit modifications and any premium and simple terms so as to facilitate comprehension. This notice shall be plainly printed in no smaller than twelve (12) point type. adjustments shall be in outline form and in clear 5
- Such notices shall not contain or be accompanied by any solicitation. 3)
- Outline of Coverage Requirements for Medicare Supplement Policies ਰ

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NOTICE OF PROPOSED AMENDMENTS

- Issuers shall provide an outline of coverage to all applicants at the time the application is presented to the prospective applicant, and except for direct response policies, shall obtain an acknowledgement of receipt of such outline from the applicant; and 1
- If a Medicare supplement policy or certificate is issued on a basis which would require revision of the outline of coverage delivered at the time of certificate when it is delivered and contain the following statement, in no less than twelve (12) point type, immediately above the company name: actually issued shall accompany such policy or application, a substitute outline of coverage properly describing the policy or certificate 5
- fully. It is not identical to the outline of coverage provided upon application, and the coverage originally applied for has not been issued." Read this outline of coverage care-"NOTICE:
- οĮο 2008.90(d)(2) of this Part, each revised outline coverage accompanying a policy or certificate issued on a basis other than that originally applied for, shall contain the following notice ap-In addition to the statement required by Section pearing in no less than twelve (12) point type: 3)

"WARNING: The (policy or certificate) you have received is not the same as the one for which you made application."

parts: a cover page, premium information, disclosure pages, and charts displaying the features of each benefit plan offered by the issuer. Please see Appendix B. The outline of coverage shall be Appendix B no less than twelve (12) point type. All plans "A-J" shall be shown on the cover page, and the plan(s) that are offered by the issuer shall be prominently identified. Premium information for plans that are offered shall be shown on pursuant to this subsection shall consist of four the cover page or immediately following the cover page and shall be prominently displayed. The in the language and format prescribed below in The outline of coverage provided to applicants 4

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NOTICE OF PROPOSED AMENDMENTS

premium and mode shall be stated for all plans that are offered to the prospective applicant. All possible premiums for the prospective applicant shall be illustrated.

- 5) The following-items-shall-be-included-in-the outline of coverage in-the-order-prescribed-below shall follow the format in Appendix B. The term "certificate" should be substituted for the word "policy" throughout the outline of coverage where appropriate.
- e) Notice Regarding Policies or Certificates Which are Not Medicare Supplement Policies

In the case wherein a policy, as defined in Section 355a(2)(a) of the Code, being sold to a person eligible for Medicare by reason of age provides one or more but not all of the minimum standards for Medicare supplements in Section 363 of the Code, such policy or certificate supplement and does not meet the minimum benefits standards set for such policies in this State. Such notice shall appear on the first page of the policy or certificate on the first page of the outline of coverage. Such notice shall be in no less than the lease than the

"THIS (POLICY OR CERTIFICATE) IS NOT A MEDICARE SUPPLEMENT (POLICY OR CERTIFICATE). IT DOES NOT FULLY SUPPLEMENT YOUR FEDERAL MEDICARE HEALTH INSURANCE. If you are eligible for Medicare, review the Medicare Supplement Buyers Guide available from the company."

f) Applications - Notice regarding policies or certificates which are not Medicare supplement policies

In the case wherein an application is used to apply for the type of policy as defined in Section 2008.90(e) of this Part, such application shall provide notice that the policy being applied for is not a "Medicare Supplement" and does not meet the minimum benefits standards set forth for such policies in this State. Such notice shall be in no less than twelve (12) point type and shall contain the following language:

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NOTICE OF PROPOSED AMENDMENTS

"THIS (POLICY, CERTIFICATE OR SUBSCRIBER CONTRACT) WHICH YOU HAVE APPLIED FOR IS NOT A MEDICARE SUP-PLEMENT (POLICY OR CERTIFICATE). IT DOES NOT FULLY SUPPLEMENT YOUR FEDERAL MEDICARE HEALTH INSURANCE. If you are eligible for Medicare, review the Medicare Supplement Buyers Guide available from the company."

g) Filing Requirements for Advertising

- 1) An issuer of Medicare supplement insurance or benefits in this State shall provide a copy of any Medicare supplement advertisement intended for use in this State whether through written, radio or television medium to the Director of Insurance of this State for review by the Director to the extent it may be required under State law.
- Notice regarding policies or certificates which are not Medicare supplement policies.

In the case wherein any advertising as defined in Section 2002.40 of 50 Ill. Adm. Code 2002 (Advertising of Accident and Sickness Insurance) is used to solicit the type of policy as defined in Section 2008.90(e) of this Part, such advertising shall provide notice that the policy being advertised is not a Medicare supplement and does not meet the minimum benefits standards set forth for such policies in this State. Such notice shall be prominently disclosed within the text of the advertisement. Such notice shall be in no less than twelve (12) point type and shall contain the following language:

"THIS (POLICY, CERTIFICATE OR SUBSCRIBER CONTRACT) IS NOT A MEDICARE SUPPLEMENT (POLICY OR CERTIFICATE). IT DOES NOT FULLY SUPPLEMENT YOUR FEDERAL MEDICARE HEALTH INSURANCE. If you are eligible for Medicare, review the Medicare Supplement Buyers Guide available from the company."

(Source: Amended at 16 Ill. Reg.

DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

Section 2008.102 Appropriateness of Recommended Purchase and Excessive Insurance

- And In recommending the purchase or replacement of any Medicare supplement policy or certificate, an agent insurance producer shall make reasonable efforts to determine the appropriateness of a recommended purchase or replacement. For purposes of this subsection the insurer will be deemed to make reasonable efforts to determine the appropriateness of the recommended purchase if the insurer complies with the standards set forth in Sections 363a(5) and (6) of the Code.
- b) Any sale of Medicare supplement coverage that will provide an individual more than one Medicare supplement policy or certificate is prohibited.

(Source: Amended at 16 Ill. Reg. _____, effective

Section 2008.103 Reporting of Multiple Policies

- a) On or before March 1 of each year an issuer shall report the following information prescribed in Appendix FP for every individual resident of this State for which the issuer has in force more than one Medicare supplement policy or certificate:
- 1) Policy and certificate number, and
- 2) Date of issuance.
- b) The items set forth above must be grouped by individual policyholder.

(Source: Amended at 16 Ill. Reg.

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

Section 2008. APPENDIX C Plan A

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semprivate room and board, general nursing and miscellaneous and amonics and amonics and amonics.			
First 60 days	All but \$628 <u>\$652</u>	0\$	6638 <u>\$652</u> (Part A Deductible)
61st thru 90th day	All but \$167 <u>\$163</u> a day	\$167 <u>\$163</u> a day	0\$
91st day and after; -While using 60 lifetime reserve days	All but \$314 <u>\$326</u> a day	6314 <u>\$326</u> a day	O 5
Once lifetime reserve days are used:			
-Additional 365 days	0\$	100% of Medicare Eligible Expenses	. 0\$
-Beyond the Additional 365 days	S	0\$	All Costs
SKILLED NURSING FACILITY CARE* You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare. approved facility within 30 days after leaving the hospital			
First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	S S S	\$0 Up to \$78.50 a day All costs
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	9 93
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited α- insurance for out-patient drugs and inpatient res- pite care	\$0	Balance

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREATMENT; such as Phy- sician's services, inpatient and outpatient medical and surgical services and sup- plies, physical and speech therapy, diag- nostic tests, durable medical equipment,			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	04
Part B Excess Charges (Above Medicare Approved Amounts)	0\$	0\$	All Costs
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	0\$ 0\$	All Costs \$0	\$0 \$100 (Part B
Remainder of Medicare Approved Amounts	80%	20%	\$0
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	\$0	0\$

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES			
-Medically necessary skilled care			
services and medical supplies	100%	0\$	0\$
-Durable medical equipment			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	0\$

(Source: Amended at 16 Ill. Reg.

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NOTICE OF PROPOSED AMENDMENTS

Section 2008. APPENDIX D Plan B

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semiprivate room and board, general nursing and miscellaneous services and supplies			
First 60 days	All but \$628 <u>\$652</u>	\$628 <u>\$652</u> (Part A Deductible)	0\$
61st thru 90th day	All but \$157 \$163 a day	\$167 \$163 a day	0\$
91st day and after; -While using 60 lifetime reserve days	All but \$314 <u>\$326</u> a day	\$314 <u>\$326</u> a day	0\$
Once lifetime reserve days are used:			
-Additional 365 days	0\$	100% of Medicare Eligible Expenses	0\$
-Beyond the Additional 365 days	\$0	\$0	All Costs
SKILLED NURSING FACILITY CARE*			
You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicareapproved facility within 30 days after leaving the hospital			
First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	Q Q	\$0 Up to \$78,50 a day All costs
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	O\$ O\$
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited co- insurance for out-patient drugs and inpatient res- pite care	0\$	Balance

DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

(PLAN B Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TRANKENT, such as Physician's services, inpatient and outpatient medical and surgical services and supplies, physical and speech therapy, diagnostic ests, durable medical equipment,			
First \$100 of Medicare Approved Amounts*	S	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	%0%	20%	9
Part B Excess Charges (Above Medicare Approved Amounts)	0\$	0\$	All Costs
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	9 9	All Costs \$0	\$0 \$100 (Part B
Remainder of Medicare Approved Amounts	80%	20%	\$0
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	0\$	ç,

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES			
-Medically necessary skilled care services and medical supplies	100%	0\$	o _s
-Durable medical equipment			
First \$100 of Medicare Approved Amounts*	0\$	S	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	0 \$

(Source: Amended at 16 Ill. Reg.

effective

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NOTICE OF PROPOSED AMENDMENTS

Section 2008. APPENDIX E Plan C

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and endsafter you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semiprivate room and board, general nursing and miscellaneous services and supplies First 60 days	All but \$638 <u>\$652</u>	6638 <u>\$652</u> (Part A	09
61st thru 90th day	All but \$157 <u>\$163</u> a day	Deductible) \$167 <u>\$163</u> a day	0\$
o issuay and arter, -While using 60 lifetime reserve days -Once lifetime reserve days are used:	All but \$314 <u>\$326</u> a day	\$314 \$3 <u>26</u> a day	9
-Additional 365 days -Beyond the Additional 365 days	S S	100% of Medicare Eligible Expenses \$0	\$0 All Costs
SKILLED NURSING FACILITY CARE- You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare- approved facility within 30 days after leaving the hospital First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	\$0 Up to \$78.50 a day \$0	\$0 \$0 All costs
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	0\$
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited co- insurance for out-patient drugs and inpatient res- pite care	0\$	Balance

NOTICE OF PROPOSED AMENDMENTS

(PLAN C Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREATMENT, such as Phy- sician's services, inpatient and outpatient medical and surgical services and sup- plies, physical and speech therapy, diag- nostic tests, durable medical equipment,			
First \$100 of Medicare Approved Amounts*	0\$	\$100 (Part B Deductible)	0\$
Remainder of Medicare Approved Amounts	80%	20%	0\$
Part B Excess Charges (Above Medicare Approved Amounts)	0\$	0\$	All Costs
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	0\$ 0\$	All Costs \$100 (Part B Deductible)	0 \$
Remainder of Medicare Approved Amounts	80%	20%	0\$
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	0\$	0\$

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES			
Medically necessary skilled care services and medical supplies	100%	0\$	0\$
-Durable medical equipment			
First \$100 of Medicare Approved Amounts*	0\$	\$100 (Part B Deductible) \$0	0\$
Remainder of Medicare Approved Amounts	<i>2</i> 08	20%	9\$

ILLINOIS REGISTER DEPARTMENT OF INSURANCE NOTICE OF PROPOSED AMENDMENTS

(PLAN C Continued)

OTHER BENEFITS-Not Covered By Medicare

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
FOREIGN TRAVEL-NOT COVERED BY MEDICARE Medically necessary emergency care services beginning during the first 60 days of each trip outside the USA			
First \$250 each calendar year	2	\$	\$250
Remainder of Charges	Q	80% to a lifetime maximum benefit of \$50,000	20% and amounts over the \$50,000 lifetime maximum

(Source: Amended at 16 Ill. Reg.

NOTICE OF PROPOSED AMENDMENTS

Section 2008. APPENDIX F Plan D

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semiprivate room and board, general nursing and miscellaneous			
First 60 days	All but \$628 \$652	\$628 <u>\$652</u> (Part A Deductible)	0\$
61st thru 90th day	All but \$167 \$163 a day	\$157 \$163 a day	0\$
91st day and after; -While using 60 lifetime reserve days	All but \$314 \$326 a day	\$314 <u>\$326</u> a day	0\$
Once lifetime reserve days are used:			
-Additional 365 days	0\$	100% of Medicare Eligible Expenses	0\$
-Beyond the Additional 365 days	\$0	\$0	All Costs
SKILLED NURSING FACILITY CARE* You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare-approved facility within 30 days after leaving the hospital First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	\$0 Up to \$78.50 a day \$0	% %0 \$1 coats
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	0\$ 0\$
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited co- insurance for out-patient drugs and inpatient res- pite care	0\$	Balance

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

(PLAN D Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREATMENT, and as Phy- sician's services, inpatient and outpatient medical and surgical services and sup- plies, physical and speech therapy diag- nostic ests, durable medical equipment,			
First \$100 of Medicare Approved Amounts*	S.	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	0\$
Part B Excess Charges (Above Medicare Approved Amounts)	Ş	0\$	All Costs
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	0\$ 0\$	All Costs \$0	\$0 \$100 (Part B
Remainder of Medicare Approved Amounts	%08	20%	Deductible)
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	0\$	0\$

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES			
-Medically necessary skilled care services and medical supplies	100%	0\$	0\$
-Durable medical equipment			
First \$100 of Medicare Approved Amounts*	93	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	%08	20%	2

NOTICE OF PROPOSED AMENDMENTS DEPARTMENT OF INSURANCE

(PLAN D Continued)

MEDICARE (PARTS A & B)-(CONTINUED)

PARTS A & B (cont'd)

YOU PAY			Balance		
PLAN PAYS			Actual Charges to \$40 a visit	Up to the number of Medicare Approved visits, not to exceed 7 each week	\$1,600
MEDICARE PAYS			0 \$	0\$	0\$
SERVICES	HOME HEALTH CARE (cont'd) AT-HOME RECOVERY SERVICES-NOT COVERED BY MEDICARE	Home care certiled by your doctor, for personal care during recovery from an injury or sickness for which Medicare spproved a Home Care Treatment Plan	-Benefit for each visit	Number of visits covered (must be received within 8 weeks of last Medicare Approved visit)	-Calendar year maximum

OTHER BENEFITS-NOT COVERED BY MEDICARE

	\$250 20% and amounts over the \$50,000 lifetime maximum	
	\$0 80% to a lifetime maximum benefit of \$50,000	
	& &	
FOREIGN TRAVEL-NOT COVERED BY MEDICARE Medically necessary emergency care services beginning during the first 60 days of each trip outside the USA	First \$250 each calendar year Remainder of Charges	

effective (Source: Amended at 16 Ill. Reg.

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NOTICE OF PROPOSED AMENDMENTS DEPARTMENT OF INSURANCE

Section 2008. APPENDIX G Plan E

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semiprivate nom and board, general nursing and miscellaneous			
First 60 days	All but \$628 \$652	6628 <u>\$652</u> (Part A Deductible)	0\$
61st thru 90th day	All but \$167 <u>\$163</u> a day	\$157	0\$
While using 60 lifetime reserve	All but \$314 <u>\$326</u> a day	\$314 <u>\$326</u> a day	%
-Once lifetime reserve days are used:			
-Additional 365 days	0\$	100% of Medicare Eligible Expenses	; 9\$
-Beyond the Additional 365 days	\$0	\$0	All Costs
SKILLED NURSING FACILITY CARE* You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare-approved facility within 30 days after leaving the hospital			
First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	\$0 Up to \$78.50 a day \$0	\$0 \$0 All costs
BLCOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	0\$ 0\$
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited co- insurance for out-patient drugs and inpatient res- pite care	0\$	Balance

DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

(PLAN E Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREAMENT, such as Phy- sician's services, inpatient and outpatient medical and surgical services and sup- ples, physical and speech therapy, diag- nostic sets, durable medical equipment,			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	%08	20%	0\$
Part B Excess Charges (Above Medicare Approved Amounts)	%	0\$	All Costs
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	S S	All Costs \$0	\$0 \$100 (Part B
Remainder of Medicare Approved Amounts	%0%	20%	\$0
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	0\$	0\$

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES			
-Medically necessary skilled care services and medical supplies	100%	0\$	9
-Durable medical equipment			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	%08	20%	0\$

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NOTICE OF PROPOSED AMENDMENTS DEPARTMENT OF INSURANCE

(PLAN E Continued)

OTHER BENEFITS-Not Covered By Medicare

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
FOREIGN TRAVEL—NOT COVERED BY MEDICARE Medically necessary emergency care eservices beginning during the first 60 days of each trip outside the USA First \$550 each calendar year Remainder of Charges	3 3	\$0 80% to a lifetime maxi- mum benefit of \$50,000	\$250 20% and amounts over the \$50,000 lifetime maximum
PREVENTIVE MEDICAL CARE BENEETI-NOT COVERED BY MEDICARE Annual physical and preventive tests and services such as: feeal occult blood test, digital rectal exam, mammogram, hear- ing screening, dipatick urnalysis, diabe- tes screening, dipatick urnalysis, diabe- tes screening, dipatick urnalysis, diabe- eraz shot, tetanus and diptheria booster and education, administered or ordered by your dector when not covered by Medicare			
First \$120 each calendar year	0\$	\$120	2
Additional charges	0\$	0\$	Ali Costs

effective (Source: Amended at 16 Ill. Reg.

NOTICE OF PROPOSED AMENDMENTS DEPARTMENT OF INSURANCE

Section 2008. APPENDIX H Plan F

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION Seniprivate room and board, general nursing and miscellaneous services and supplies			
First 60 days	All but £638 <u>\$652</u>	\$628 \$652 (Part A Deductible)	0\$
61st thru 90th day	All but \$167 <u>\$163</u> a day	\$167 <u>\$163</u> a day	0\$
91st day and atter; -While using 60 lifetime reserve days	All but \$314 \$326 a day	\$314 <u>\$326</u> a day	0\$
Once lifetime reserve days are used:			
-Additional 365 days	0\$	100% of Medicare Eligible Expenses	0\$
-Beyond the Additional 365 days	0\$	0\$	All Costs
SKILLED NURSING FACILITY CARE- You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare approved facility within 30 days after leaving the hospital First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	\$0 Up to \$78.50 a day \$0	\$0 \$0 All costs
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	0%
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited co- insurance for out-patient drugs and inpatient res- pite care	O \$	Balance

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NOTICE OF PROPOSED AMENDMENTS DEPARTMENT OF INSURANCE

(PLAN F Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREATMENT, as the as Physician's services, inpatient and outpatient medical and surgical services and supplies, physical and stosech therapy, dag-postic ests, durable medical equipment,			
First \$100 of Medicare Approved Amounts*	0\$	\$100 (Part B Deductible)	0 \$
Remainder of Medicare Approved Amounts	%08	20%	0 \$
Part B Excess Charges (Above Medicare Approved Amounts):	9	100%	0\$
вгоор			
First 3 pints	≈	All Costs	9
Next \$100 of Medicare Approved Amounts*	0\$	\$100 (Part B Deductible)	0\$
Remainder of Medicare Approved Amounts	80%	20%	0\$
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	oş.	. 0\$

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES			
•Medically necessary skilled care services and medical supplies	100%	0\$	0\$
Durable medical equipment First \$100 of Medicare Approved Amounts*	0\$	\$100 (Part B Deductible) \$0	0\$
Remainder of Medicare Approved Amounts	80%	20%	0\$

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DEPARTMENT OF INSURANCE

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(PLAN F Continued)

OTHER BENEFITS-Not Covered By Medicare

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
FOREIGN TRAVEL-NOT COVERED BY MEDICARE Medically necessary emergency care services beginning during the first 60 days of each trip outside the USA First \$250 each calendar year Remainder of Charges	S S	\$0 80% to a lifetime maxi- mum benefit of \$50,000	\$250 20% and amounts over the \$50,000 lifetime maximum

(Source: Amended at 16 Ill. Reg.

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

Section 2008. APPENDIX I Plan G

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semiprivate room and board, general nursing and miscellaneous			
First 60 days	All but \$628 \$65 2	6628 <u>\$652</u> (Part A Deductible)	9
61st thru 90th day 91st day and efter	All but \$157 \$163 a dsy	\$167 <u>\$163</u> a day	Q
While using 60 lifetime reserve	All but \$314 <u>\$326</u> s day	\$314 <u>\$326</u> a day	0\$
-Once lifetime reserve days are used:			
-Additional 365 days	0\$	100% of Medicare Eligible Expenses	<u>&</u>
Beyond the Additional 365 days	0\$	\$0	All Costs
SKILLED NURSING FACILITY CARE- You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare- spproved facility within 30 days after leaving the hospital			
First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	\$0 Up to \$78.50 a day \$0	\$0 \$0 All costs
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	S S S S S S S S S S S S S S S S S S S
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited ∞- insurance for out-patient drugs and inpatient res- pite care	03	Balance

NOTICE OF PROPOSED AMENDMENTS

(PLAN G Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREATMENT, such as Phy- sician's services, inpatient and outpatient medical and surgical services and sup- plies, physical and speech therapy, diag- nostic tests, durable medical equipment,		4	
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	0\$
Part B Excess Charges (Above Medicare Approved Amounts)	0\$	%08	20%
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	0\$	All Costs \$0	\$0 \$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	0\$
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	0\$	0\$

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES		-	
-Medically necessary skilled care services and medical supplies	100%	0\$	0\$
-Durable medical equipment			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	0\$

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

(PLAN G Continued)

MEDICARE (PARTS A & B)-(CONTINUED)

PARTS A & B (cont'd)

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOME HEALTH CARE (cont'd) AT-HOME RECOVERY SERVICES-NOT COVERED BY MEDICARE			
Home care certified by your doctor, for personal care during recovery from an injury or sickness for which Medicare approved a Home Care Treatment Plan			
-Benefit for each visit	0\$	Actual Charges to \$40 a visit	Balance
Number of visits covered (must be received within 8 weeks of last Medicare Approved visit)	0 \$	Up to the number of Medicare Approved visits, not to exceed 7 each week	
-Calendar year maximum	0\$	\$1,600	

OTHER BENEFITS

FOREIGN TRAVEL-NOT COVERED BY MEDICARE			
Medically necessary emergency care services beginning during the first 60 days of each trip outside the USA			1
First \$250 each calendar year Remainder of Charges	& &	\$0 80% to a lifetime maximum benefit of \$50,000	\$250 20% and amounts over the \$50,000 lifetime maximum

, effective (Source: Amended at 16 Ill. Reg.

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NOTICE OF PROPOSED AMENDMENTS

Section 2008. APPENDIX J Plan H

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semiprivate room and board, general nursing and miscellaneous			
First 60 days	All but \$628 \$652	6628 <u>\$652</u> (Part A Deductible)	0\$
61st thru 90th day 91st day and after	All but \$167 <u>\$163</u> a day	\$157 <u>\$163</u> a day	0\$
While using 60 lifetime reserve days	All but \$316 a day	\$314 <u>\$326</u> a day	0\$
-Once lifetime reserve days are			
-Additional 365 days	0\$	100% of Medicare Eligible Expenses	0\$
-Beyond the Additional 365 days	\$0	0\$	All Costs
SKILLED NURSING FACILITY CARE- You must meet Medicare's requirements, including having been in a hospital for a least 3 days and entered a Medicare- approved facility within 30 days after leaving the hospital			
First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	\$0 Up to \$78.50 a day \$0	\$0 \$0 All costs
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	- SA SA
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited co- insurance for out-patient drugs and inpatient res- pite care	O\$	Balance

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

(PLAN H Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREATMENT, such as Phy- sician's services, inpatient and outpatient medical and surgical services and sup- plies, physical and speech therapy, diag- nostic cests, durable medical equipment,			·
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	%0%	20%	S.
Part B Excess Charges (Above Medicare Approved Amounts)	0\$	0\$	All Costs
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	9.9	All Costs \$0	\$0 \$100 (Part B
Remainder of Medicare Approved Amounts	80%	20%	\$0 \$0
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	0\$	0\$

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES			
-Medically necessary skilled care services and medical supplies	100%	0\$	3
-Durable medical equipment			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	%08	20%	3

NOTICE OF PROPOSED AMENDMENTS DEPARTMENT OF INSURANCE

(PI.AN H Continued)

OTHER BENEFITS-Not Covered By Medicare

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
FOREIGN TRAVEL-NOT COVERED BY MEDICARE Medically necessary emergency care services beginning during the first 60 days of each trip outside the USA			
First \$250 each calendar year Remainder of Charges	9 9	\$0 80% to a lifetime maximum benefit of \$50,000	\$250 20% and amounts over the \$50,000 lifetime maximum
BASIC OUTPATIENT PRE- SCRIPTION DRUGS-NOT COVERED BY MEDICARE			
First \$250 each calendar year	9	9	\$250
Next \$2,500 each calendar year	O\$	50%-\$1,250 calendar year 50% maximum benefit	50%
Over \$2,500 each calendar year	0\$	0\$	All Costs

(Source: Amended at 16 Ill. Reg.

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NOTICE OF PROPOSED AMENDMENTS DEPARTMENT OF INSURANCE

Section 2008. APPENDIX K Plan I

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semiprivate room and board, general nursing and miscellaneous services and supplies			÷
First 60 days	All but \$628 \$552	6638 <u>\$652</u> (Part A Deductible)	3
61st thru 90th day 91st day and after	All but \$167 \$163 a day	\$167 \$163 a day	08
While using 60 lifetime reserve	All but \$314 \$326 a day	\$314 \$326 a day	2
-Once lifetime reserve days are used:			
-Additional 365 days	3	100% of Medicare Eligible Expenses	.
-Beyond the Additional 365 days	0\$	\$0	All Costs
SKILLED NURSING FACILITY CARE- You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare- approved facility within 30 days after First on Jan.	Ę		
First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	\$0 Up to \$78.50 a day \$0	\$0 \$0 All costs
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	22
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited co- insurance for out-patient drugs and inpatient res- pite care	9	Balance
			\rfloor

NOTICE OF PROPOSED AMENDMENTS

(PLAN K Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TREATMENT, such as Phy- sician's services, inpatient and outpatient medical and surgical services and sup- plies, physical and speech therapy, diag- nostic tests, durable medical equipment,			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	0 \$
Part B Excess Charges (Above Medicare Approved Amounts)	Q	100%	%
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	S. S.	All Costs \$0	\$0 \$100 (Part B
Remainder of Medicare Approved Amounts	%08	20%	\$0
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	0\$	0\$

PARTS A & B

HOME HEALTH CARE			
MEDICARE APPROVED SERVICES			
-Medically necessary skilled care services and medical supplies	100%	0\$	9,
-Dursble medical equipment			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	9

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

(PLAN I Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TRANTANT, and as Physical sician's services, inpatient and outpatient medical and surgical services and supplies, physical and speech therspy, diagnostic tests, durable medical equipment,			
First \$100 of Medicare Approved Amounts*	0\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	S
Part B Excess Charges (Above Medicare Approved Amounts)	S	100%	₩.
BLOOD First 3 pints Next \$100 of Medicare Approved Amounts*	Q Q	All Costs	\$0 \$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	\$0
CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES	100%	, 0\$	0\$

PARTS A & B

HOME HEALTH CARE MEDICARE APPROVED SERVICES			
-Medically necessary skilled care services and medical supplies	100%	0\$	\$
Durable medical equipment			
First \$100 of Medicare Approved Amounts*	\$	0\$	\$100 (Part B Deductible)
Remainder of Medicare Approved Amounts	80%	20%	\$

(PLAN I Continued)

MEDICARE (PARTS A & B)-(CONTINUED)

PARTS A & B (cont'd)

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOME HEALTH CARE (cortd) A1-HOME RECOVERY SERVICES-NOT COVERED BY MEDICARE			
Home care certified by your doctor, for personal care during recovery from an injury or sickness for which Medicare approved a Home Care Treatment Plan	-		
-Benefit for each visit	9	Actual Charges to \$40 a Balance	Balance
-Number of visits covered (must be received within 8 weeks of last Medicare Approved visit)	S	Up to the number of Medicare Approved visits, not to exceed 7 each week	
-Calendar year maximum	9,	\$1,600	

OTHER BENEFITS

FOREIGN TRAVEL-NOT COVERED BY MEDICARE			
Medically necessary emergency care services beginning during the first 60 days of each trip outside the USA			
First \$250 each calendar year	0\$	0\$	\$250
Remainder of Charges*	9	80% to a lifetime maximum benefit of \$50,000	20% and amounts over the \$50,000 lifetime maximum
BASIC OUTPATIENT PRESCRIPTION DRUGS-NOT COVERED BY MEDI- CARE			
First \$250 each calendar year	0\$	\$0	\$250
Next \$2,500 each calendar year	0\$	50%-\$1,250 calendar year maximum benefit	20%
Over \$2,500 each calendar year	\$0	\$0	All Costs

(Source: Amended at 16 Ill. Reg.

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

Section 2008. APPENDIX L Plan J

MEDICARE (PART A)-Hospital Services-Per Benefit Period

*A benefit period begins on the first day you receive service as an inpatient in a hospital and ends after you have been out of the hospital and have not received skilled care in any other facility for 60 days in a row.

			5
SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOSPITALIZATION* Semiprivate room and board, general nursing and miscellaneous gervices and supplies			
First 60 days	All but \$628 <u>\$652</u>	\$628 <u>\$652</u> (Part A Deductible)	0
61st thru 90th day 91st day and after;	All but \$157 \$163 a day	\$167 \$163 a day	9
While using 60 lifetime reserve	All but \$314 \$326 a day \$314 \$326 a day	\$314 <u>\$326</u> a day	:
Once lifetime reserve days are used:			
-Additional 365 days	0\$	100% of Medicare Eligible Expenses	\$
-Beyond the Additional 365 days	\$0	\$0	All Costs
SKILLED NURSING FACILITY CARE- You must meet Medicare's requirements, including having been in a hospital for at least 3 days and entered a Medicare- approved facility within 30 days after leaving the hospital			
First 20 days 21st thru 100th day 101st day and after	All approved amounts All but \$78.50 a day \$0	\$0 Up to \$78.50 a day \$0	\$0 \$0 All costs
BLOOD First 3 pints Additional amounts	\$0 100%	3 pints \$0	0\$ 0\$
HOSPICE CARE Available as long as your doctor certifies you are terminally ill and you elect to receive these services	All but very limited co- insurance for out-patient drugs and inpatient res- pite care	0\$	Balance

NOTICE OF PROPOSED AMENDMENTS

(PLAN J Continued)

MEDICARE (PART B)-Medical Services-Per Calendar Year

*Once you have been billed \$100 of Medicare-Approved amounts for covered services (which are noted with an asterisk), your Part B Deductible will have been met for the calendar year.

YOU PAY		&	0	\$	\$ \$ \$	\$
PLAN PAYS		\$100 (Part B Deductible)	20%	100%	All Costs \$100 (Part B Deductible) 20%	0\$
MEDICARE PAYS		3	80%	0\$	04 04 06 06	100%
SERVICES	MEDICAL EXPENSES—IN OR OUT OF THE HOSPITAL AND OUTPATIENT HOSPITAL TRANDENT OF A such as Physician's services, inpatient and outpatient medical and surgical services and supplies, physical and speech therapy, diagnostic ests, durable medical equipment,	First \$100 of Medicare Approved Amounts*	Remainder of Medicare Approved	Part B Excess Charges (Above Medicare Approved Amounts)	BLOOD First 3 pints Next \$100 of Medicare Approved Amounts* Remainder of Medicare Approved Amounts	CLINICAL LABORATORY SERVICES- BLOOD TESTS FOR DIAGNOSTIC SERVICES

PARTS A & B

HOME HEALTH CARE			
MEDICARE APPROVED SERVICES			
-Medically necessary skilled care services and medical supplies	100%	0\$	3
-Durable medical equipment			
First \$100 of Medicare Approved Amounts*	3	\$100 (Part B Deductible) \$0	3
Remainder of Medicare Approved Amounts	%08	20%	\$

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DEPARTMENT OF INSURANCE NOTICE OF PROPOSED AMENDMENTS

(PLAN J Continued)

MEDICARE (PARTS A & B)-(CONTINUED)

PARTS A & B (cont'd)

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
HOME HEALTH CARE (cont'd) AT.HOME RECOVERY SERVICES-NOT COVERED BY MEDICARE			
Home care certified by your doctor, for personal care during recovery from an injusty or sickness for which Medicare annual of Home Com Presidents Disc			
Benefit for each visit	Q	Actual Charges to \$40 a visit	Balance
Number of visits covered (must be received within 8 weeks of last Medicare Approved visit)	2	Up to the number of Medicare Approved visits, not to exceed 7 each week	
-Calendar year maximum	Q	\$1,600	

OTHER BENEFITS

FOREIGN TRAVEL-NOT COVERED BY MEDICARE Medically necessary emergency care estrices beginning during the first 60 days of each trip outside the USA			
First \$250 each calendar year	2	2	\$250
Remainder of Charges	\$	80% to a lifetime maximum benefit of \$50,000	20% and amounts over the \$50,000 lifetime maximum
EXTENDED OUTPATIENT PRE- SCRIPTION DRUGS-NOT COVERED BY MEDICARE			
First \$250 each calendar year	28	03	\$250
Next \$6,000 each calendar year	&	50%-\$3,000 calendar year maximum benefit	20%
Over \$6,000 each calendar year	3	2	All Costs

DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

(PLAN J Continued)

OTHER BENEFITS (cont'd.)

SERVICES	MEDICARE PAYS	PLAN PAYS	YOU PAY
PREVENTIVE MEDICAL CARE BENEFIT-NOT COVERED BY MEDICARE Annual physical and preventive tests and services such as: feed occult blood test, digital rectal exam, mam- mogram, hearing screening, dipstic urnalysis, diabetes screening, thy, roid function test, influenza shot, tetarus and diptheria booster and education, administered or ordered by your dector when not covered by Medicare			
First \$120 each calendar year	0\$	\$120	9
Additional charges	9	\$0	All costs

(Source: Amended at 16 III. Reg.

effective

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DEPARTMENT OF INSURANCE

NOTICE OF PROPOSED AMENDMENTS

Section 2008.APPENDIX M Notice to Applicant Regarding Replacement of Accident and Sickness Insurance (Response-Other-Than Direct)

Insurance company's name and address

SAVE THIS NOTICE! IT MAY BE IMPORTANT TO YOU IN THE FUTURE

According to (your application) (information you have furnished) you intend to terminate existing accident and sickness insurance and replace it with a policy to be issued by (Company Name) Insurance Company. Your new policy will provide thirty (30) days within which you may decide without cost whether you desire to keep the policy.

You should review this new coverage carefully. Compare it with all accident and sickness coverage you now have. Terminate your present policy only if, after due consideration, you find that purchase of this Medicare supplement coverage is a wise decision.

STATEMENT TO APPLICANT BY INSURANCE PRODUCER:

I have reviewed your current medical or health insurance coverage. The replacement of insurance involved in this transaction does not duplicate coverage, to the best of my knowledge. The replacement policy is being purchased for the following reason(s) (Check one):

- 1) Health conditions which you may presently have (pre-existing conditions) may not be immediately or fully covered under the new policy. This could result in denial or delay of a claim for benefits under the new policy, whereas a similar claim might have been payable under your present policy.
- 2) State law (Section 363(7)(b) of the Illinois Insurance Code, Ill. Rev. Stat. 1990 Supp., ch. 73, par. 975) provides that your replacement policy or certificate may not contain new preexisting conditions, waiting

NOTICE OF PROPOSED AMENDMENTS

periods, elimination periods or probationary periods. The issuer will waive any time periods applicable to preexisting conditions, waiting periods, elimination periods, or probationary periods in the new policy (or coverage) for similar benefits to the extent such time was spent (depleted) under the original policy.

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If you still wish to terminate your present policy and replace it with new coverage, be certain to truthfully and completely answer all questions on the application concerning your medical and health history. Failure to include all material medical information on an application may provide a basis for the company to deny any future claims and to refund your premium as though your policy had never been in force. After the application has been completed and before you sign it, review it carefully to be certain that all information has been properly recorded. [If the policy or certificate is guaranteed issue, this paragraph need not appear.]

Do not cancel your present policy until you have received your new policy and are sure that you want to keep it.

(Signature of Insurance Producer or Other Representative) Typed Name and Address of Issuer or Insurance Producer

(Applicant's Signature)

Date

* Signature not required for direct response sales.

(Source: Amended at 16 Ill. Reg.

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ILLINOIS DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

- Heading of the Part: Illinois Right to Privacy in the Workplace Act
- 2) Code Citation: 56 Ill. Adm. Code 360

7

Proposed Action:	New Section New Section				New Section	New Section
3) Section Numbers:	360.100 360.110	360.120 360.130	360.140	360.160	360.170	360.180

- 4) Statutory Authority: Implementing Sections 5, 10, 15 and 20 of the Illinois Right to Privacy in the Workplace Act (III. Rev. Stat. 1991 Ch. 48 pars. 2851, 2855, 2860, 2865, 2870).
- 5) A complete description of the subjects and issues involved: This Act protects an employee's use of lawful products during non-working hours and prohibits an employer from taking any employment-related action against an employee or a prospective employee for such use.
- 6) Will this proposed amendment replace an emergency rule currently in effect?
- 7) Does this rulemaking contain an automatic repeal date? No
- 8) Does this proposed amendment contain incorporations by reference? Yes
- 9) Are there any other proposed amendments pending on this part? No
- 10) Statement of Statewide policy objective: The Department is promulgating these rules, pursuant to its grant of power under Section 15(a) of the Act, in order to grant employees access to a claims procedure and to inform them of their rights under this procedure.
- 11) Time, place and manner in which interested persons may comment on the proposed rulemaking: Persons who wish to comment on this proposed rulemaking may submit comments no later than 45 days after the publication of this notice to:

Ann Plunkett-Sheldon, General Counsel 111inois Department of Labor 310 South Michigan Avenue, 10th Floor Chicago, Illinois 60604 A public hearing on this rulemaking will be held at 9:30 a.m., Monday, June 29, 1992, at the Department of Labor offices at 310 South Michigan Avenue, 10th Floor, Chicago, Illinois.

The full text of the proposed rules begins on the next page.

ACT PART 360
PRIVACY IN THE WORKPLACE RIGHT TO ILLINOIS

SUBPART A: GENERAL PROVISIONS

Section 360.100

Scope Purpose and Definitions

Filing of the Claim and the Employer's Response Scheduling and Notice of Informal Investigative Conference Issuance of Administrative Subpoens Application of the Rules of Evidence, Pleading or Procedure Investigative Conference Attorneys and Witnesses in Investigative Conference Disruptive Conduct at Investigative Conferences Continuances

SUBPART B: INVESTIGATION OF CLAIMS UNDER THE

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 $\frac{360.160}{360.170}$

AUTHORITY: Implementing and authorized by implementing Section 5, 10, 15 and 20 of the Illinois Right to Privacy in the Workplace Act (Ill. Rev. Stat 1991, ch. 48, pars. 2851, 2855, 2860, 2865, 2870).

SOURCE: Filed at

Ill. Reg

, effective

GENERAL PROVISIONS

SUBPART A:

Purpose and Scope Section 360.100

This Act is designed to prohibit employers from discharging or otherwise retaliating against employees or prospective employees who use lawful products outside the workplace during nonworking hours.

Section 360.110 Definitions

"Act" means the Right to Privacy in the Workplace Act, as amended [111. Rev. Stat. 1991, Ch. 48, pars. 2851, 2855, 2860, 2865 and 2870].

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"Department" shall mean the Illinois Department of Labor, its director and his/her authorized representatives.

"Director" means the Director of the Illinois Department of Labor.
"Director" means the Director of the Illinois Department of Labor.
"Employer" includes any individual, partnership, association, corporation, business trust, enterprise or any person or group of persons for whom the employee is performing work with a reasonable expectation of compensation.
"Heart ing officer" means an individual authorized by the Department to determine the merits of individual claims alleging violations of the Act. 9

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to determine the merits of individual claims alleging violations of the Act.

"Prospective employee" or "applicant for employment" means not only an individual applying for a job position, but also an individual to whom an offer of employment has been extended, but who has not yet begun working for the employer. 4

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ILLINOIS DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

"Lawful Products" shall include, but shall not be limited to, all tobacco products, all food products, and all over-the-counter drugs or drugs lawfully prescribed by the employee's own physician. Lawfull Products also shall include alforbolic beverages except that any consumption of these beverages which impairs the performance of the employee at the workplace shall not be protected under this Act. 6

SUBPART B: INVESTIGATION OF CLAIMS UNDER THE ACT

360.120 Filing of the Claim and the Employer's Response Section

An employee may file a complaint with the Department alleging a violation of the Act by filling out and signing the Claim form provided by the Department and submitting the form and any supporting documentation.

Complaints shall be reviewed to determine whether there is cause for investigation.

Complaints shall be reviewed to determine whether there is cause for investigation.

When appropriate, the Department will notify the employer of the claim.

The employer's response must be filed with the Department within 10 days of notification.

Cloop receipt of an employer's response disputing the claim, the Department may, when appropriate, send a copy of the employer is response to the Claimant.

If the employee disagrees with the employer response to the Department within 10 days stating his/her reasons for the disagreement within 10 days stating his/her reasons for the disagreement within 10 days stating his/her reasons for the disagreement may may be complyer fails to respond within the prescribed deadline, the Department shall dismiss the claim.

If the employer fails to respond within the prescribed deadline, the prescribed detection whether an investigative conference on the claim is whether an investigative conference on the claim is a)

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The Department may consider untimely submissions by either party upon written request by the party within a reasonable period of time, if there is a showing that the delay was occasioned by good cause beyond the party's control. 듸

360.130 Scheduling and Notice of Informal Investigative Conference Section

When the Department is unable to resolve a dispute upon review of the information submitted by the parties, the Department may schedule an information submitted by the parties, the Department may schedule an Department conducts conference to obtain further information; to determine if there is a violation of the Act, and to attempt to a sessive the matter equitably.

A written notice of conference shall be sent to the parties not less than 10 days prior to the date of the conference. a)

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Issuance of Administrative Subpoens Section 360.140

The Department may issue an administrative subpoena to compel the attendance of a party or witness and/or the production of documents upon the Department's determination that the information to be produced by a subpoena is necessary and relevant to the Department's investigation and that the Department cannot obtain the information by any other reasonable means.

ILLINOIS DEPARTMENT OF LABOR

NOTICE OF PROPOSED RULES

뒤 Application of the Rules of Evidence, Pleading or Procedure an Investigative Conference Section 360.150

Officer makes an investigation or conducts a conference, the is not bound either by the rules of evidence or by any technical of pleading or procedure. When a Hearing Officer in formal rules

Section 360.160 Attorneys and Witnesses in Investigative Conferences

A party may be accompanied at an investigative conference by his/her attorney, and by a translator, if necessary. The parties may bring witnesses to the conference, but the Hearing Officer shall decide what witnesses shall be heard and in what order. The Hearing Officer may exclude witnesses from the conference when they are not giving testimony. The Hearing Officer shall conduct and control the proceedings. No tape recordings, stenographic report or other verbatim record of the conference shall be made.

Disruptive Conduct at Investigative Conferences 3ection 360.170

If any person becomes so disruptive or abusive that a full and fair conference cannot be conducted, the Hearing Officer shall exclude the person from the conference. The Hearing Officer, in his/her discretion, may take any of the following actions: continue the conference without the participation of the excluded individual; render a decision based upon the evidence previously presented; dismiss the employee's claim, or strike the employer's response.

Section 360.180 Continuances

Parties shall be prepared to proceed at the conference. Emergency requests for continuances or postponement by a party will be granted only upon a showing of good cause. Requests for a continuance must be made in person to the Hearing Officer at the time of the conference. The Department will not consider requests for continuances or postponements made by a party prior to or subsequent to the conference.

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DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED REPEALER

- Heading of the Part: Mental Health Clinic Program Standards and Provider Requirements 7
- 130 Ill. Adm. Code 29 Code Citation: 5

3

- Statutory Authority: Implementing and authorized by the Community Services Act (III. Rev. 1991, ch. 914, par. 901 et seq.) and Section 15.3 of the Mental Health and Developmental Disabilities Act (III. Rev. Stat. 1991, ch. 911, par. 100-15.3). 4
- A Complete Description of the Subjects and Issues Involved: With the adoption of 59 III. Adm. Code 132, Medicaid Community Mental Health Services Program, which incorporates 59 III. Adm. Code 130, 59 III. Adm. Code 130 is no longer needed.

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AND DEVELOPMENTAL DISABILITIES DEPARTMENT OF MENTAL HEALTH

NOTICE OF PROPOSED REPEALER

- Will this proposed repealer replace an emergency rule currently in effect? An emergency amendment was adopted to Sections 130.110 at 16 II. Reg. 2656 (February 14, 1992). This emergency rulemaking which added language pursuant to the Emergency Budget Act of 1992, will expire June 30, 1992. 6
- entire The Š. Does this rulemaking contain an automatic repeal date? Part is being repealed. 2
- Does this proposed repealer contain incorporations by reference? applicable - Part 130 is being repealed. 8
- Not Are there any other proposed amendments pending on this Part? applicable - Part 130 is being repealed. 6
- Statement of Statewide Policy Objections: This rulemaking does not affect the State Mandates Act (III. Rev. Stat. 1991, ch. 85, par. 2205). 10
- regarding this proposed rulemaking before the expiration of the first 45-day notice period. Submissions must be in writing and directed to: Rules Administrator, Illinois Department of Mental Health and on this Any interested person may submit comments, data, views or argument Developmental Disabilities, 402 Stratton Building, Springfield, IL 62765, Time, Place and Manner in which interested persons may comment telephone (217)785-3313. proposed rulemaking: 11)
- Initial Regulatory Flexibility Analysis: 12)
- submitted to the Business Assistance Office of the Date rule was Department of 8
- Types of small businesses affected: a

Community mental health providers.

Reporting, bookkeeping or other procedures required for compliance: ວ

Not applicable - this rulemaking is being repealed

Types of professional skills necessary for compliance: 6

Not applicable - this rulemaking is being repealed.

text of the Proposed Repealer begins on the next page: The full

DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

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NOTICE OF PROPOSED REPEALER

TITLE 59: MENTAL HEALTH
TER I: DEPARTMENT OF MENTAL HEALTH
AND DEVELOPMENTAL DISABILITIES CHAPTER

MENTAL HEALTH CLINIC PROGRAM STANDARDS AND PROVIDER REQUIREMENTS PART 130

SUBPART A: GENERAL PROVISIONS

Suspension or termination of certification Certification appeal criteria and process Application and certification process Recertification and annual review Termination of certification Clients' rights Rate setting Definitions 130.30 130.40 130.50 130.51 130.60 130.70 130.15 130.20

Incorporation by reference

Section

130.11 130.10

SUBPART B: PROVIDER ADMINISTRATIVE REQUIREMENTS

Organizational structure	Policies and procedures (Repealed)	Personnel and administrative recordkeeping
130.80	130.90	130.100

Fiscal and statistical Program evaluation 130.105 130.110

Clinic facilities Recordkeeping 130.120

130.130

SUBPART C: UTILIZATION REVIEW AND CONTINUITY OF CARE

Utilization review 130.140 130.150

Clinical records

Physician direction and mental health clinic services Continuity of care and coordination of service 130.170 130.160

Availability of services

SERVICES SUBPART D:

Comprehensive assessment Service categories 130.190 130.200

Treatment plan development and modification 130.210 130.220

Psychiatric treatment

Crisis intervention 130.230

DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF PROPOSED REPEALER

Day treatment 130.240

Case management 130.250

130.TABLE

Program Adult Service Utilization Mental Health Clinic Program Children and Adolescents Service Mental Health Clinic Parameters m 130. TABLE

AUTHORITY: Implementing and authorized by the Community Services Act (III. Rev. Stat. 1991, ch. 91_4° , pars. 901 et seq.) and Section 15.3 of the Department of Mental Health and Developmental Disabilities Act (III. Rev. Utilization Parameters Stat. 1991, ch. 911, par. 100-15.3).

SOURCE: Adopted at 12 III. Reg. 5356, effective March 8, 1988; emergency amendments at 14 III. Reg. 18100, effective October 19, 1990, for a maximum of 150 days; Emergency Expired March 18, 1991; amended at 15 III. Reg. 8882, , effective effective June 10, 1991; repealed at 16 Ill. Reg.

SUBPART A: GENERAL PROVISIONS

Section 130.10 Purpose

- (42 U.S.C.A. 1396 et seq., 1983) for grants to states for medical assistance eligible clients, under the Illinois medical assistance program (89 Ill. Adm. Code 140) (Medical Payment) administered by participation by providers who voluntarily elect to participate in the mental health clinic program. The mental health clinic program pursuant to Subpart D, supported financially in whole or in part by The requirements set forth in this Part establish criteria for shall include the provision of specific mental health services the Department of Mental Health and Developmental Disabilities, the Department of Children and Family Services (DCFS) and by Medicald the Department of Public Aid. a)
- These requirements are for the purpose of assuring that clients receiving mental health clinic services shall receive quality services in accordance with this Part and in accordance with 42 CFR 440 and 456, 1989 for Medicald-eligible clients. Q
- recertification of the provider's eligibility for approval and enrollment in the Illinois medical assistance program by the Department of Public Aid (89 Ill. Adm. Code 140) (Medical Payment). and periodically review providers participating in the mental health clinic program including the certification and The Department shall use these requirements to certify, recertify, <u>်</u>

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- treatment, and rehabilitative services for individuals who require mental health services. This shall include services designed to assessment, include shall program health clinic benefit individuals: mental Ŧ
- With current symptoms of mental illness who require an assessment to determine the need for mental health treatment and/or rehabilitation; 7
- Who are assessed to require medically necessary mental health treatment and/or rehabilitation services, to promote growth and/or maintenance of independent role functioning; and 5
- independent role functioning, a high level of personal distress, and who require crisis intervention services to ij Who are experiencing a substantial change/deterioration achieve stabilization. 3

Incorporation by reference Section 130.11

recognized organization or association that are incorporated by reference in this Part are incorporated as of the date specified and do not include any Any rules or standards of an agency of the United States or of a nationallylater amendments or editions.

Section 130.15 Clients' rights

- as well as the private sector, are set forth in Sections 2-100 through 2-111 of the Code (II1. Rev. Stat. 1989, ch. 91%, pars. The rights of recipients of mental health services, in the public 2-100 through 2-111). a)
- The observation and protection of clients' rights, as specified in the statute cited in subsection (a), are applicable to all Sections of this Part. Q

Section 130.20 Definitions

Medicald reimbursable mental health services. Enrollment as a Medicaid "Certification." Initial and recertification of the eligibility of a provider to participate in the mental health clinic program and to provide mental health services. Certification is issued by the Department upon a determination of compliance with this Part, in accordance with Subparts B, C, and D. Certification must be issued by the Department prior to enrollment with the Department of Public provider is issued by the Department of Public Aid on receipt of a Aid as a Medicaid provider in order to provide

NOTICE OF PROPOSED REPEALER

letter of certification by the Department and on determination compliance with 89 Ill. Adm. Code 140.11 by the Department Public Aid.

mental health services financially supported in whole or in part by the Department (III. Rev. Stat. 1989, ch. $91\frac{1}{4}$, par. 1-123), or An individual who is Medicaid-eligible and is receiving "Client."

The Mental Health and Developmental Disabilities Code (III. Rev. Stat. 1989, ch. 91%, par. 1-100, et seq.).

Developmental Disabilities Confidentiality Act (Ill. Rev. Stat. 1989, ch. 913, and Health Mental The "Confidentiality Act." par. 801 et seq.).

"Day." A calendar day unless otherwise indicated.

Department of Mental Health Illinois Developmental Disabilities. "Department."

The Director of the Illinois Department of Mental Health and Developmental Disabilities or his/her designee. "Director."

the medical assistance program by the Department of Public Aid on 'Enrollment." The official enrollment of a certified provider in determination of compliance with 89 Ill. Adm. Code 140.11.

whose jurisdiction has been extended into Illinois via the child's legally authorized placement in accordance with the applicable guardian of the person of a child appointed by an Illinois juvenile court or a legally-appointed guardian or custodian or other party granted legal care, custody and control over a minor child by a uvenile court of competent jurisdiction located in another state interstate compact. (The Juvenile Court Act of 1987 (III. Rev. Stat. 1989, ch. 37, pars. 802-1 to 802-31); Interstate Compact on The court-appointed guardian or conservator of the person and/or estate under the Probate Act of 1975 (Ill. Rev. Stat. 1989, ch. 110}, par. 1-1 et seq.) or a temporary custodian or the Placement of Children (Ill. Rev. Stat. 1989, ch. 23, par. 2601 'Guardian."

comprehensive assessment which identifies the array of services required to meet the individual's medical, psychological, social, emotional, physical, vocational, or other specialized mental health "Individual treatment plan (ITP)." A written document based on a

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level of functioning in everyday life in three critical areas including: vocational/educational productivity, independent living and self-care, and social network relationships. For children and 'Level of role functioning." For adults, refers to the client's adolescents, these areas include family/home, school and community. Scales approved for use are the Global Assessment of Functioning (GAF Scale) contained in the Diagnostic and Statistical Manual of Mental Disorders, Third Edition revised, (DSM-III-R), American Psychiatric Association, (1987 edition) or the Children's Global Assessment Scale (CGAS Scale) as published in the Archives of General Psychiatry, Volume 40, November 1983, pp. 1228-1231. Scale

"Medicaid." Medical assistance issued by the Illinois Department of Public Aid under the provisions of Title XIX of the Social Security Act (42 U.S.C.A. 1396 et seq., 1983), for eligible recipients including Aid to the Aged, Blind and Disabled (AABD), Aid to Families with Dependent Children (AFDC), Medical Assistance No Grant (MANG), Refugee Repatriate Program (RRP) recipients as well as Title XIX eligible DCFS wards. "Medicaid clinic option (MCO)." Refers to clinical services, as defined in 42 CFR 440.90, 1989, that at the option of the State may be included in the Medicaid State Plan as covered services for Medicaid clients.

certified provider under a contractual agreement with either the Department or DCFS. These services are supported financially in whole or in part by the Department or DCFS and are also included under the Illinois medical assistance program (89 Ill. Adm. Code rehabilitative services provided on an outpatient basis by a for eligible clients and are, therefore, reimbursable under Medicaid. Providers must be certified by the Department and also be enrolled with and be approved by the Department of Public Aid as a Medicaid provider in order to provide the Medicaid reimbursable health clinic program." Assessment, treatment mental health services. "Mental health professional (MHP)." A mental health professional (MHP) who provides services under the supervision of a qualified mental health professional(s), as defined below, in providing mental health clinic services specified in Subpart D to a client and his/her family, as necessary. The mental health professional must possess a bachelor's degree, a practical nurse license pursuant to the Illinois Nursing Act of 1987 (III. Rev. Stat. 1989, ch. 111, par. 3501 et seq.) or have a minimum of five years supervised experience in mental health or human services.

NOTICE OF PROPOSED REPEALER

emotional process, judgment, behavior, or ability to cope with the ordinary demands of life. For purposes of this Part, this does not exclude individuals with a primary diagnosis of alcoholism, drug substantially impairs the person's thoughts, perception of reality, dependence, or mental retardation who have a need for mental health disorder emotional or mental A illness."

"Physician direction." Direction of treatment by a physician licensed pursuant to the Medical Practice Act of 1987 (III. Rev. Stat. 1989, ch. 111, par. 4400-1 et seq.), including: the þ responsibility physician for mental health services; and professional The assumption of

The physician's formulation of, approval or involvement in each client's individual treatment plan within 30 days from the date of completing the mental health assessment. To meet once, prescribe the type of care provided, and if the services are not limited by the prescription, periodically this requirement a physician must see the client at least review the need for continued care.

the and "Physician services." The mental health clinic services which must be provided directly by a physician licensed pursuant to Medical Practice Act of 1987 are psychiatric evaluation psychotropic medication prescription and review. "Provider." Any corporation, governmental entity or other legal entity certified as a provider by the Department to provide mental health clinic services in accordance with this Part that have a contract with either the Department or DCFS and are enrolled as a Medicaid provider by the Department of Public Aid.

the ь One (QMHP)." health professional mental 'Oualified

health services or one year of clinical experience, under A physician licensed under the Medical Practice Act of 1987 to practice medicine or osteopathy with training in mental supervision, in treating problems related to mental illness, or specialized training (the treatment of children and adolescents); A psychiatrist (a physician licensed under the Medical Practice Act of 1987) who has successfully completed a the American training program in psychiatry approved by

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Medical Association, the American Osteopathic Association, or other training program identified as equivalent by the

A psychologist licensed under the Clinical Psychologist Licensing Act (Ill. Rev. Stat. 1989, ch. 111, par. 5351 et seq.) with specialized training in mental health services; licensed under The Clinical Social Work and Social Work Act (III. Rev. Stat. 1989, ch. 111, par. 6351 et seq.) with An individual possessing a master's degree in social work

Act of 1987 with at least one year of clinical experience in a mental health setting or a master's degree in psychlatric A registered nurse licensed pursuant to The Illinois Nursing

specialized training in mental health services.

An occupational therapist registered pursuant to the Illinois Occupational Therapy Practice Act (Ill. Rev. Stat. 1989, ch. 111, par. 3701 et seq.) with at least one year of clinical experience in a mental health setting; and

or family therapy, or related field who has successfully completed a practicum and/or internship which includes a minimum of 1,000 hours, or has one year of clinical experience under the supervision of a qualified mental health An individual possessing a master's or doctorate degree in counseling and guidance, rehabilitation counseling, social work, vocational counseling, psychology, pastoral counseling, professional. Skills development and training." Skills which are required by an individual in order to achieve independent functioning and emotional stability. The skills are developed through training activities with a focus on interpersonal and daily living skills, including:

Conversational skills;

Dating and sexual appropriateness skills;

Medication self-management;

Money management and entitlement acquisition;

NOTICE OF PROPOSED REPEALER

emergency ij self-preservation and Self-care skills situations;

Use of public transportation and other community resources.

Section 130.30 Application and certification process

- Successful applicants will be certified by the Department and enrolled as a provider in the Illinois medical assistance apply for certification as a provider in the mental health clinic corporation, or governmental entity or other legal entity may program by the Department of Public Aid, pursuant to 89 Ill. Adm. a)
- DCFS wards shall submit applications to DCFS. DCFS is authorized to perform the functions ascribed to the Department by this Part in relation to child care facilities licensed by DCFS with the A prospective provider which elects to be certified as a provider shall submit an application to the Department on form DMHDD-1218, "Application for Certification to Participate in the Medicaid Clinic Option Program". Applicants licensed by DCFS, which provide services to emotionally disturbed children and adolescents who are suspension, issuance, ō certification. exception Ç
- Department of Mental Health and Developmental Disabilities, Bureau Chicago, IL 60634 or to the Department of Children and Family of Certification and Licensure, 4201 North Oak Park Avenue, Services, Bureau of Regulatory Enforcement, 406 East Monroe Street, Applications may be obtained by submitting a request in writing to: Springfield, IL 62701. G
- The applicant shall submit a completed form DMHDD-1218, a copy of the utilization review plan pursuant to Section 130.140 (a)-(i), and the applicant's audit for the preceding year, if the Department has not received an annual audit pursuant to 59 Ill. Adm. Code 103 (Grants) and documentation of all other components described in subsection (g) below. ਰੇ
- application. The Department or DCFS will request the missing Applications which are missing any of the components specified in subsections (d) above and (g) below shall be returned to the component(s) from the applicant and hold the incomplete application packet for no more than 20 working days from the date of receipt of applicant within 20 working days from the receipt of the application. ()

DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

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- Applications which are complete for a review of compliance shall be reviewed against the administrative provider requirements described in subsection (d) above, and for minimum requirements for certification described in subsection (g) below and service G
- applicants which are fully accredited by the Joint Commission Commission on Accreditation of Rehabilitation Facilities, or Developmental Disabilities, or the Council on Accreditation of Services for Families and Children, or the Department of Alcoholism and Substance Abuse, or applicants licensed by DCFS with no substantial contingencies in the areas covered on the Accreditation of Health Care Organizations or the on Services for People The Department shall grant a waiver of the specified in Sections 130.80, 130.100 and Council Accreditation 7
- If an application to the Department is in compliance with this Part and meets the requirements of subsections (d) above If an application to DCFS is in compliance with this Part and DCFS will certify to the Department the eligibility of the applicant for participation in the MCO. The Department then shall issue a letter of certification and send the Medicaid (g) below, the Department shall issue a letter of certification and send the Medicaid provider enrollment form. meets requirements of subsections (d) above and (g) below, provider enrollment form. 5
- the identified deficiencies within 60 working days, the Department shall refuse to issue certification, or DCFS shall If the application is not in compliance with this Part, the Department or DCFS shall notify the applicant in writing of the deficiencies within 20 working days from the date of receipt. If the applicant does not satisfactorily respond refuse to certify the eligibility of the applicant. 3
- Minimum requirements for certification include documentation of Sections 130.110(a), (b), (c)(1), (c)(2), (e), (g), (h), and (l), Sections 130.120(a)(1), (b) and (c), Section 130.140, Sections 130.150(a), (d), (e), (i) and (l), Sections 130.160(a), (b) and (c), Section 130.170(f), Section 130.190(b), Sections 130.200(a), (f), (h), (1), and Sections 130.210(c), (d) and (g). 8
- On site review for verification and compliance with Subparts B, C E

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- on-site review by the Department or DCFS will be conducted within six months of certification to determine compliance Verification will consist of a survey for compliance with the requirements of Subparts B and D. For Sections 130.80, retrospective review of a sample of Medicaid-eligible client records will be performed. A sample will be 10% of available with documentation provided at the time of application. 130.100, 130.110, and 130.120, provider policy manuals, personnel records, and business records will be reviewed. For Section 130.130, the premises on which the program is offered will be physically inspected. For Subpart D, records or a minimum of 20 records. 7
- of the Department's Mental Health Clinic Program Survey Instrument Interpretive Guidelines (1991) to agencies seeking participation in the The Department shall provide a copy 5
- Department or DCFS shall notify the applicant in writing of its working days 40 determination regarding verification within following the completion of the on-site review. The į)
- requirements of this Part, the Department or DCFS as applicable, shall so state in a letter within 40 working maintain certification, full compliance with at least all items in subsections (d) and (g) is required. A plan of correction shall be submitted for deficiencies identified in days from the date of completion of the on-site review. compliance with other Sections of Subparts B, C and D. confirms If the on-site review requirements of this Par 7
- ţ If the on-site review does not confirm compliance with the requirements of this Part, the Department or DCFS shall notify the applicant in writing of the deficiencies within 40 working days from the date of completion of the on-site review. The applicant shall have 60 working days from the correct the deficiencies and supply the new information to the Department. If the applicant does not satisfactorily working days, the postmark date of the letter outlining the deficiencies Department shall revoke the applicant's certification. respond to the deficiencies within 60 5
- If certification has been revoked, the applicant may appeal the decision and request a hearing and initiate further action pursuant to Section 130.60 and Section 10 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989, ch. 127, par. 1010). 7

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- Billings for services rendered under the MCO must be submitted by a provider to the Department or DCFS in the manner required by each of the Departments. Ž,
- Care Applicants whose certification has been revoked are liable subsequently disallowed under audit by the U.S. Health from claims filed under certification Financing Administration. disallowances 7

Section 130.40 Recertification and annual review

- The Department shall recertify enrolled providers annually. a)
- Thirty days prior to the anniversary date of certification, the provider shall submit to the Department or DCFS: 7
- a11 that the provider continues to meet A statement signed by the administrator of requirements of this Part; and organization F
- A summary of the utilization review activities. â
- contract a copy of the annual audit report for the preceding fiscal year pursuant to Section 130.110, if an annual audit Providers shall also submit to the Department with which they has not already been received by the appropriate Department. 5

Reviews Q

- providers certified under this Part to recertify the The Department or DCFS shall conduct a second full compliance review within 12 months of the initial certification date of provider. 7
- shall conduct a full compliance review every three years to enforce compliance with the provisions of this Part and to Subsequent to this recertification, the Department or DCFS recertify the provider. 6
- The Department or DCFS shall conduct focused compliance reviews of providers on those Sections or subsections cited as not in compliance with the program requirements as stated in the immediate prior compliance review. These focused reviews shall be conducted each year of the two-year period between full compliance reviews. 3

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- The Department or DCFS shall be granted access to all clinic facilities and service areas. Client records and all other request, during the initial compliance survey, focused review records shall be made available to the Department or DCFS, on and three-year full compliance survey required by this Section, in accordance with the Confidentiality Act. 4
- changes in policies or procedures required in this Part within 30 days prior to implementation of the proposed change(s). ๋

Section 130.50 Suspension or termination of certification

- certification period shall result in the certified provider being Failure to comply with the requirements of this Part during a issued a suspension from the mental health clinic program. a)
- The Department shall issue a written warning and a correction order to a certified provider who has failed to comply with Subparts B, C, or D of this Part. Ω
- the written notice to correct the cited The provider shall have a maximum of 60 working days from postmark date of deficiencies. <u>ာ</u>
- If the provider does not correct the cited deficiencies within 60 working days, the Department shall refer the matter to the Department of Public Aid for action pursuant to 89 Ill. Adm. Code ਰੇ
- such suspension shall not be stayed pending an appeal, if The Department will immediately suspend a certified provider, determines: е Э
- Section Ç pursuant Physician direction of services, 130.160(b), is not being provided; 7
- being is Physical or mental injury or sexual assault inflicted upon clients by the provider's staff; or 5
- an immediate danger to clients, such as gas leakage in the That the facility in which the services are provided presents hearing system. 3
- The suspension shall continue until the Department determines that the cited deficiencies have been corrected or until action pursuant to Sections 130.50(c) and (d) is taken. Ç,

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action taken pursuant to this Section and further shall refer any The Department shall notify the Department of Public Aid of any evidence of Medicaid fraud within 10 working days to the Department or Public Aid for further action. 8

Section 130.51 Termination of certification

Failure to comply with the following during a certification period shall result in the certified provider being issued a termination of its certification:

- Meets any of the grounds for termination set forth in 89 Ill. Adm. Code 140.16; a)
- Discontinuance of delivery of all mental health clinic services which the provider has been certified; **P**
- Has been convicted under Article VIII A of the Illinois Public Aid Code (Ill. Rev. Stat. 1989, ch. 23, par. 8A-1 et seq.). G

Section 130.60 Certification appeal criteria and process

- Grounds for appeal by the provider are: (e
- Determination of non-compliance with this Part; 7
- Refusal to issue certification; 5
- Refusal to issue recertification; 3
- Suspension of mental health clinic service delivery; 4
- Termination of mental health clinic service delivery. 5
- Certification appeal criteria and process **Q**
- period because of non-compliance with this Part, the Department shall send, by registered mail, written notice to the applicant or the certified provider within 30 working recertification should not be issued or that certification should be suspended or terminated during a certification days of the determination. The notice shall contain the specific requirements the provider has not complied with and If the Department determines that certification or the annual the Department's proposed action as follows: 7

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- A) If the applicant or certified provider chooses to appeal the Department's decision, the applicant or provider shall submit a written request for a hearing to the Department within 20 working days of the date of receipt of the notice.
- B) If an appeal is initiated by a certified provider, services shall be continued pending a final administrative decision.
- If the applicant or certified provider does not submit a request for a hearing, as provided in this Part or if after conducting the hearing the Department determines that the certification or recertification should not be issued or that the certification should be suspended or terminated, the Department shall issue an order to that effect. If the order is to suspend or terminate the certification, it shall specify that the order takes effect upon receipt by the certified provider, and that the provider shall not provide mental health clinic services during the pendency of any proceeding for judicial review of the Department's decision, except by court order.
- The Department shall schedule a hearing within 20 working days of receipt of the request for appeal. The applicant or the provider and the applicant's or provider's representtative, hereinafter referred to as the appellant, shall be notified by registered mail at least 10 working days before the hearing. The notice of hearing shall include:
- A) The date, time, and place of the hearing;
- B) The legal authority to hold the hearing;
- C) The reference to the particular sections of the statutes or rules involved; and
- D) A short statement of the matters asserted.
- Each hearing shall be conducted at a time, date and place reasonably convenient to the appellant.
- 4) The hearing shall be conducted by an impartial hearing officer authorized by the Department Director to conduct such hearings. The officer shall not have participated in the decision under appeal.

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- 5) The hearing officer, at his/her sole discretion, may grant continuances of the hearing, not to exceed two, at the request of either the appellant or the Department.
- The Department shall tape record the hearing. A copy of the recording shall be given to the appellant if the appellant so requests no later than five working days after the hearing officer makes his/her decision. The appellant must request a copy of the recording no later than 72 hours after receipt of the decision, if a copy is so desired. The Department shall charge the appellant for the cost of the tape.
- At the hearing both parties may present written and oral evidence. The appellant may be represented by the person of his or her choice. The Department shall have the burden of proving that there was substantial evidence of non-compliance with these standards. Substantial evidence is such evidence as a reasonable person can accept as adequate to support a conclusion. The Department shall present its evidence first, then the appellant shall present evidence.

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Evidence

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- A) The hearing officer shall not be bound by the rules of evidence or procedure, but shall conduct the proceedings in a manner that ensures both parties are allowed to present their evidence and arguments fully and freely.
- Any party or representative may ask questions of any other party or witness, and the hearing officer may ask questions of any other party or witness. Questions impeaching the witness's character or credentials shall be improper.
- the hearing officer shall only consider evidence presented at the hearing in making his/her decision as to whether or not the Department sustained its burden of proof. The hearing officer shall uphold, reverse or modify the Department's decision or determine that the Department lacks jurisdiction. Within five working days after the hearing, the hearing officer shall submit his/her written decision, which shall include a statement of facts concerning the appeal and conclusions to the Department. A copy of the decision shall be sent to the appellant at the same time it is submitted to the Department.

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- The hearing officer shall send the appeal shall be deemed abandoned and shall be dismissed In the event the appellant does not appear at the hearing, written notice of the dismissal to the appellant. by the hearing officer. 10
- the appellant is not satisfied with the hearing officer's decision, the appellant may request a review of the decision by the Director or designee. The request must be made in writing to the Director or designee no later than 10 working request shall briefly state the appellant's objections to the days after receipt of the hearing officer's decision. 11)
- The record shall include those items required by Section 11 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1989, ch. 127, par. 1011). 12)
- decision upholding, reversing, modifying or remanding the designee shall review the hearing officer's decision and the record of the hearing. After consideration of all the evidence, the Director or designee shall issue a written hearing officer's decision and setting forth the facts of the receipt of the request for review, and copies shall be sent or she determines that the procedures set out in this Section were properly followed and that the decision was The Director or designee shall issue a decision within 20 working days after to the appellant. The Director shall uphold the decision if designee's decision shall constitute a final administrative Upon receipt of the request for review, the Director The Director's appeal and the bases for the decision. supported by substantial evidence. 13)
- review exclusively as provided in the Administrative Review Law (Ill. Rev. Stat. 1989, ch. 110, par. 3-101 et seq.). Final administrative decisions shall be subject to judicial 14)

Section 130.70 Rate setting

The Department will compute rates for services which may be reimbursed under the MCO program. The rates will be computed each state fiscal year and will be effective 30 days after approval is received from the Department of Public Aid. The rates shall be in a)

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- Reimbursement rates will be the product of hourly payment rates and services units designated as fractions or multiples of service hours as indicated in Section 130. TABLE A and Section 130. TABLE B. Q
- An hourly payment rate under the MCO program will be the sum hourly rate factors for: ົວ
- Direct care staff: Salaries and wages are computed hourly basis for staff who provide billable services. 7
- Non-direct care expenses: Total provider agency expenses, less direct care staff wages, salaries and paid benefits. 5
- Employee benefits: Paid benefit expenses for direct care 3
- Employee benefit time: Direct care staff paid benefit time (vacation, personal days, and sick time). 4
- for and/or documenting billable services for staff care direct Work time Case preparation: Medicaid clients. preparing 2

SUBPART B: PROVIDER ADMINISTRATIVE REQUIREMENTS

Section 130.80 Organizational structure

- The administrative organization shall promote effective operation of the various programs and agencies in a manner consistent with all applicable state laws, regulations, and adopted procedures. a)
- There shall be clear written policy guidelines for decision-making and program operations and provision for monitoring the same. 9
- The provider shall have written provisions for ensuring against a range of liabilities. ច
- continuing applicable There shall be written provisions for orientation and education of, and ongoing communication with, all governing boards. ਚ

Section 130.100 Personnel and administrative recordkeeping

The provider shall have a comprehensive set of personnel policies and procedures. Personnel policies and procedures include but are not limited to: a)

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- descriptions and qualifications including licensure and certification shall be maintained for all staff, including physicians, who are employed either directly or by contract by the provider or by an agency contracting with the provider 7
- perform job functions, and at a minimum, perform annual staff A provider shall have provisions for ensuring that staff contractees possess the skills and knowledge needed evaluations 5
- a11 o procedures for use descriptions and volunteers shall be maintained. job Written 3
- shall be related to program goals and may include support of staff The provider shall plan staff development and continuing education activities for its employees which broaden their existing knowledge in the field of mental health and related areas. These activities attendance at conferences, university courses, visits to other agencies, use of consultants, educational presentations within the agency, assigned reading, and so forth. **(**

Section 130.105 Program evaluation

The provider shall use a program evaluation system for purposes of determining the degree to which a program is meeting its goals and objectives.

- as quantitative characteristics such qualitative characteristics, such This system shall monitor caseload information, and recipient satisfaction a)
- evaluation reports, which would describe the outcome of monitoring The evaluation system shall include mechanisms for producing activities. þ
- These reports shall serve to interpret and summarize data into useful information, and to provide recommendations for remediative action when necessary. G

Section 130,110 Fiscal and statistical

- Mental health clinic program services shall not be denied on the basis of the client's inability or ability to pay. a)
- The provider shall maintain a schedule of mental health clinic program fees for each service based on actual costs. Sliding fee scales shall be maintained for clients unable to pay actual costs. þ

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- The provider shall comply with the following provisions regarding accounting requirements and audits: ာ
- Accounting requirements: 7
- requirements as prescribed by the Department in this Each provider shall establish and maintain a formal modified accrual accounting system in accordance with include a level of documentation, classification of reporting Part, including policies and procedures regarding (GAAP) 1989) Accepted Accounting Principles Brace, Jovanovich Publishers, 19 meet to audit trails, billing and fee collection. and (Harcourt, Generally entries, ¥
- All accounting entries shall be supported by the specific source document generating the entry, recorded in books of original entry, and posted to a general ledger on a monthly basis. **a**
- including the appropriate utilization and distribution The provider shall ensure proper fiscal management of funds, the use of mechanisms for producing financial reports and regular audits of accounts. ວ
- Information about separate special funds, e.g., capital expenditures, shall be made available to the Department or DCFS on request. â
- funds that are received that are not restricted by the donor. Transfers of unrestricted funds shall be shown The provider shall record in the operating fund all as transfers from the fund balance. 亩

Audit requirements: 5

after the end of the provider's fiscal year, to the Department. These required audit reports shall be prepared in accordance with the current American Institute of Certified appropriate for the provider and in accordance with relevant federal single audit requirements (e.g., U.S. Office of Management and Budget Circular A-128, April 12, 1985 or Thompson The provider shall submit an annual audit report 120 days standards Circular A-133 (Single Audit Information Service, Thompson Publishing Group, 1725 K. Street N.W., Suite 200, Washington, The report shall contain all applicable Public Accountants generally accepted auditing DC 20006)).

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statements including the basic financial statement presenting the financial position of the organization, the results of its operation, and changes and fund balances or retained earnings. The report shall contain the certified public (A report will not be accepted if the certified public accountant's opinion is qualified or denied because the taken as a whole, or an assertion to the effect that an the certified public accountant expresses a qualified opinion, a disclaimer of accountant's opinion regarding the financial statements, opinion, or an adverse opinion, the reason, shall be stated. provider placed an unnecessary limitation on the scope of the expressed. If opinion cannot be

- provider shall also submit, 120 days after the end of the ider's fiscal year, the State of Illinois Interagency provider's fiscal year, the State of Illinois Int Statistical and Financial Report (ISFR) to the Department. ਚ
- The provider shall also comply with the requirements governing audits, false reporting and other fraudulent activities, pursuant to 89 Ill. Adm. Code 140.30 and 140.35 for services provided to Medicaid-eligible clients.
- provider may submit billings for services in a batch as cribed by the Department or DCFS. The billings shall include prescribed by the following:

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- The batch shall contain a claim transaction for each covered item of service provided to a client. 7
- within the fiscal year the service was delivered and within six months of the date that the service was delivered or within 60 days of the end of the fiscal year whichever comes A claim transaction shall be included with a submitted batch 5
- batch as necessary to disclose fully the nature and extent of The provider shall keep and make available such hardcopy records and source documents associated with each submitted service billings included therein. 3
- Each batch submitted to the Department shall be accompanied by a transmittal document providing a description of the batch (submitting provider, number of claim transactions, etc.) and a signed certification for each such batch. 4

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- regarding client's private insurance coverage or third party liability coverage on the claim transaction. In addition, The provider shall report to the Department or DCFS information adjustments to prior approved claims must be submitted on the claim 8
- For Medicaid-eligible clients, the provider shall bill all other The provider shall bill non-Medicaid-eligible clients for mental health clinic program services based on the fee for service policy developed by the provider and approved by the provider's board. third parties prior to billing the Department or DCFS for services and shall maintain a record of all charges. E
- The provider shall enter into an annual contract with the Department or DCFS for the provision of the mental health clinic program services. The following elements shall be present in the annual contract: Ŧ
- The effective date and duration of the contract; 7
- The types of services and service levels to be provided; 6
- The payment rate for each type of service to be delivered; 3
- The billing process and voucher cycle for reimbursement; 4
- Liability statement of contractor and contractee; 2
- Breach of contract statement and specific acts leading to contract termination; 9
- Termination of contract process and requirements; 2
- Statement of compliance with this Part; and 8
- of the responsible governing body or board and the Department or DCFS. Signature 6
- Prior to the reimbursement of a provider agency, the Department of Public Aid must approve each service billing pursuant to 89 Ill. Adm. Code 140. ÷

Section 130.120 Recordkeeping

The provider shall maintain, in the regular course of business, the following: a)

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records, which may indicate financial arrangements between the provider and other providers in the determine compliance with this Part including but not limited program and other entities, or which are necessary business and all

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- Business ledgers of all transactions, A
- Records of all payments received, including cash, B)
- Records of all payments made, including cash, ວ
- and including stock record books papers, minute books, Corporate 6
- Records of all arrangements and payments related in any way to the leasing of real estate or personal property, Including any equipment, (iii
- Records of all accounts receivable and payable; and E
- Hard copy and source documents relating to the creation of the service billing files. 6
- Any and all client records which relate to the quality of services provided by the provider or which document the service for which payment is claimed. 5
- The business and client records required to be maintained must be retained for a period of not less than five years from the date of service, except that if an audit is initiated within the required retention period the records must be retained until the audit is completed and every exception resolved. This provision is not to be construed as a statute of limitations.

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- All clinical and financial records required to be maintained shall be readily available for inspection, audit and copying (including photocopying) by Department or DCFS personnel and Department of Public Aid and U.S. Health Care Financing Administration compliance personnel during normal business hours at the provider's facility. Department or DCFS personnel shall make all attempts to examine such records without interfering with the professional activities of the provider. ົວ
- The compilation and storage of and accessibility to client records shall be governed by written policies and procedures, in accordance with the Confidentiality Act, which shall specify that: Ŧ

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- persons Access to client records shall be limited to per authorized by the Confidentiality Act and to the client; 7
- All entries in the client record shall be current, legible, dated and signed by the author; 5
- Facilities for the handling, processing and storage of client records shall be secured from theft, loss, or fire and access limited to personnel authorized by the provider; and 3
- or other automated information systems shall be secure from Client data maintained on magnetic tapes, computer files, theft, loss, or fire. 7
- The client's financial record shall include the financial status of the client at service initiation, with an annual update documenting the method of payment, the fee assessed (based on a sliding scale fee schedule), and services rendered which substantiate billing records, i.e., type and amount of service rendered, date(s) rendered, and by whom rendered. **e**

Section 130.130 Clinic facilities

The provider shall:

- Use facility(s) meeting accessibility standards as contained in the Environmental Barriers Act (Ill. Rev. Stat. 1989, ch. 111½, par. 3711 et seq.). a)
- Use facility(s) accessible to public transportation within thirty minutes walking distance in urban areas with a metropolitan population of 100,000 people or more. minutes walking distance <u>@</u>
- Use facility(s) located on paved roads in non-urban areas where the metropolitan population is under 100,000 people. ာ
- Comply with approved state and local ordinances and codes relating to fire, building and sanitation, health and safety requirements as follows effective at the time of application: ਚ

Fire 7

- Extinguishers, NFPA 10, - Standard for Portable Extin (National Fire Protection Association, 1984); F
- Standard Types of Building Construction, (National Fire Protection Association, 1985); NFPA 220, a)

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- C) NFPA 255, Test of Surface Burning Characteristics of Building Materials (National Fire Protection Association, 1984);
- D) NFPA 258, Measuring Smoke Generated by Solid Material (Construction), (National Fire Protection Association, 1987);
- E) Fire Resistance Index (Underwriters Laboratories, Inc., January 1987);
- F) Building Material Index (Underwriters Laboratories, Inc., January 1987);
- G) The rules of the Office of the State Fire Marshal at 41 III. Adm. Code 100.

2) Building

- A) "AN ACT in relation to the licensing and regulation of plumbers, to repeal a certain Act therein named, and to prescribe penalties for the violation thereof" (Ill. Rev. Stat., 1989, ch. 111, par. 1101 et seq.).
- B) NFPA 70 National Electrical Code (National Fire Protection Association, 1987).
- C) The "Uniform" or "National Building Code" as adopted by the local or county ordinance.
- 3) Sanitation, health and safety
- A) Have written policies and procedures for the provision of housekeeping services at the facility(s) specifying staff assignments and equipment and supplies to be used.
- B) Provide equipment and furnishings for the client and staff capacities, including at a minimum, desks, chairs, tables, file cabinets and storage cabinets. Written policies and procedures for maintaining equipment and furnishings shall be available.
- C) Provide all locations where services are delivered, including offices, with functioning lighting.

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- D) Maintain all facility(s) rooms at a minimum temperature of 72 degrees; rooms will not be smoke-filled and all windows will be operating and screened or stormed.
- E) Have written policies and procedures for the maintenance of its facility(s). Floors will be maintained with a smooth, but non-slip surface.
- F) Designate a space for client assessment, treatment and rehabilitation which shall be conducive to privacy.
- G) Develop and maintain an external and internal emergency disaster plan, including a fire evacuation plan.

SUBPART C: UTILIZATION REVIEW AND CONTINUITY OF CARE

Section 130.140 Utilization review

There shall be a written utilization review (UR) plan and ongoing activities designed to assess the appropriateness of the admission to clinic services, intensity/level of services, and continued clinic services. The written UR plan shall address:

- The methods and procedures for performing and recording individual case reviews;
- b) The authority and functions of the individual case review designated unit. The designated unit may be:
- 1) A committee chaired by a QMHP, or
- 2) A QMHP;
- c) Procedures describing the frequency of individual case reviews, at least quarterly and in accordance with Sections 130.TABLE A and 130.TABLE B;
- d) Procedures to ensure that the review includes and summarizes an analysis of the client's progress over the previous 90 days and discusses trends from past months;
- e) The policies and procedures for documenting and reporting individual case reviews, determinations and recommendations to the supervising QMHP and if applicable, the billing department;
- f) Procedures for appeal of review decisions by the responsible QMHPs and the clients;

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- determinations, results, and/or recommendations in accordance with the Confidentiality Act ; Provisions for ensuring confidentiality of individual case reviews, 8
- Procedures for following up on case review recommendations; and

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and for continuing treatment is provided only by that the final written signature of the reviewing QMHP. ensure Ç authorization Procedures Ŧ

Section 130.150 Clinical records

the but is not limited to client's clinical record shall contain, following:

- [dentifying information including name, provider identification number, Medicald recipient identification number, address and telephone number, sex, date of birth, marital status, next of kin, date of initial contact and initiation of mental health services, and source of referral; a)
- Documentation of the informed consent for mental health services; P
- Assessment and reassessment reports; G
- A current individual treatment plan, progress reviews and notes; Ŧ
- psychotropic with specific treatment a11 oę Documentation medication; **6**
- Documentation of missed appointments; Ç,
- Documentation of client movement (referral/transfer) during any active service period to or from the provider's programs or to or from other providers; 8
- Documentation of each service rendered which describes: P
- The type of service, as specified in the individual treatment 7
- The relatedness of the service to the individual treatment plan goals; 7
- The modifications, if any, in services; 3
- The outcome(s) of services. 3

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- the provider can justify the extensions and/or increases based upon the clinical need and level of functioning of the client. The client's clinical need and level of functioning is determined by and/or increases beyond the maximum units set forth in Sections 130.TABLE A and 130.TABLE B will be allowed by the Department if such factors as the diagnostic and prior hospitalization history, assessment data, and social history information which indicates the client's inability to maintain his or her level of functioning without continued treatment. The provider will be held responsible service durations. for extension of for any claims disallowed. Justification Ŧ
- A record of grievances filed by the client, including the nature of the complaint, date of complaint, and a statement regarding the resolution of the complaint; 7
- A record of client's major accidents or incidents, self-reported or observed, resulting in an adverse change in the client's physical and/or mental functioning; and ⊋
- the documenting the outcome of treatment and linkages for continued services. Discharge summary 7

Section 130,160 Physician direction and mental health clinic services

Mental health clinic services shall be prescribed and/or delivered by a physician and delivered by qualified mental health professionals under the direction of a physician. a)

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approval of the individual treatment plan or by signing and dating his/her notation indicating concurrence with the individual treatment plan in the client's record. This shall occur whenever document his/her direction by signing and dating his/her children and adolescents, whichever comes first. If the physician is not a psychiatrist, the physician must have access to a is directing one year's responsibility by the physician for service provision and the formulation of, approval of, or involvement of the physician in The physician there is a significant change in the treatment plan (i.e., change treatment) or at least once within every six-month period for adult clients and at least once within every three-month period for Physician direction shall include the assumption of professional each client's individual treatment plan within 30 days from the in mode or modality of service, problem identification, or focus of experience in the treatment of children and adolescents. must have If the physician date of completing the mental health assessment. children, the physician psychiatrist for consultation. services for

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- A QMHP, as defined in Section 130.20, may deliver mental health supervision of other mental health professionals, pursuant to clinic services under physician direction in accordance with subsection (b) above. The QMHP shall also provide direct Subpart D. °
- annual inservice staff training and development programs consistent with their area of responsibility to enable all professional mental health staff to perform their duties effectively. QMHPs and other mental health professionals shall participate in p
- consultants who speak the language(s) likely to be used by the and/or The general program staffing mix shall include personnel service area target population. e

Section 130.170 Continuity of care and coordination of service

- The provider shall ensure and promote the continually of client services within the provider's programs and services and between the provider and other providers serving the client. a)
- of service initiation-until termination from service and The provider shall be responsible for service coordination at the communicate this information to the client. The provider shall: time Q
- writing with other providers serving the client regarding the development of and revisions in the individual treatment plan, the client's status, and progress, with the client's Document communications by telephone, face to face and/or in written consent; 1
- Assure communication among staff and providers at the point of service transfer and termination concerning the clinical findings on which the decision is based; and 5
- Communicate by telephone, in writing or face to face with other organizations when the client is receiving mental health services from more than one provider to ensure overall coordination and monitoring of services provided. 3
- to a receiving program of the provider, or is terminated from service and referred to a program operated by another service provider, if the client provides written authorization. The provider shall communicate relevant treatment and service information prior to or at the time that the client is transferred ີວ

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- The provider shall follow-up and document, in the client's record, linkage has occurred and the client is receiving services. the referrals to other human service agencies Ŧ
- The provider shall develop written interagency agreements with other relevant human service providers in the service area, as necessary. (0)
- mental health facility(s) in accordance with 59 Ill. Adm. Code 125 (Recipient The provider shall ensure and promote continuity of client services between the provider and the state-operated Discharge/Linkage Aftercare). £)
- system, jails, hospitals, school systems and other related human service organizations as needed to insure access and coordination The provider shall maintain a relationship with the local judicial of services. 8

Section 130.180 Availability of services

- health services, directly or under formal contractual agreements, which shall include the provision of the services specified in Section 130.190(a). The Department will waive this provision if services cannot be contracted or if contracted services could not be obtained and if enforcement would limit availability of mental health clinic services in a planning area, to insure an adequate The provider shall insure the provision of comprehensive mental level and distribution of mental health services. a)
- Mental health clinic services shall be available and accessible to any person in need of mental health services. If the provider is licensed by DCFS as a child welfare agency and has a mission statement that clearly identifies its primary target population as children and their families, it must have formal linkage agreements and policies that ensure appropriate referrals for adults needing The provider shall have written criteria stating how procedural, or cultural and linguistic barriers to treatment and to minimize designed þe services will rehabilitation. â
- Services shall be routinely available at times other than 9:00~a.m. to 5:00~p.m., to meet the mental health needs of the service area target population. Û

SUBPART D: SERVICES

Section 130.190 Service categories

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- The following mental health clinic services shall be available: a)
- Comprehensive assessment and treatment planning 7
- Mental health assessment; A)
- Psychiatric evaluation;
- Psychological evaluation; ວ
- Treatment plan development and modification. 6
- Crisis intervention 5
- Psychiatric treatment 3
- Individual therapy; (Y
- Group therapy; a)
- Family therapy; ္ပ
- Psychotropic medication-prescription and review; 6
- Psychotropic medication-monitoring and training. ω Θ
- treatment 7
- Intensive stabilization; ¥
- Extended treatment and rehabilitation. B
- Case management 2
- In order to be certified by the Department and enrolled by the Department of Public Aid, a prospective provider must, at a minimum, provide comprehensive assessment and treatment planning and either of the following: crisis intervention, case management, psychiatric treatment, day treatment. (q ,
- enroll for certification of remaining services, using forms prescribed by the Department or DCFS. Services shall be certified compliance will be determined through a retrospective review of Enrolled providers must obtain certification for all mental health clinic services within 12 months of the provider's initial certification unless waived by the Department. The provider shall based on compliance with the requirements of this Subpart. Such

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client records and quality assurance documents and the inspection of the provider's premises.

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- This may be provided following the development of an individual treatment plan for the duration of the service period or immediately in a crisis situation for the duration of the crisis the client is otherwise unable to obtain services, to assure provision of services, to assure the safety and well-being of the be provided to or arranged for clients as part of specific service categories listed in subsection (a) (1) through subsection (a) (5) service period. Persons other than QMHP's and MHP's may transport the client. Transportation for the accompanying parent, guardian, or caregiver of a minor client may also be provided as necessary. The Department or DCFS will consider transportation necessary when client (e.g., transfer of a client in crisis to a hospital), when access to services is limited by unavailability of alternative transportation or economic distress (i.e., the client lacks funds In addition to the mental health interventions, transportation may above, as necessary, for the receipt of mental health services. for transportation).
- reimbursed at an all-inclusive per client-hour rate payable to the Services such as individual, group, and family therapy, psychotropic medication prescription, review, monitoring and training, crisis intervention and case management shall nearest quarter hour.

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- Day treatment services such as intensive stabilization and extended treatment and rehabilitation shall be reimbursed at an all-inclusive per client-day rate payable for a four-hour period or payable to the nearest hour, e.g., at one-quarter of the day rate for clients who do not receive the full four hours of service. £
- Psychiatric services provided by physicians are reimbursed through the Department of Public Aid. 6

Section 130.200 Comprehensive assessment

a)

court, shall receive an assessment of his/her need for mental health services. The assessment process may include a preliminary The provider shall insure that an individual requesting mental health services, or any individual who has been referred by the assessment; a mental health assessment; a psychological evaluation and/or a psychiatric evaluation. The assessment process shall result in a determination of the need for mental health services, the type of mental health services required and shall ensure the psychiatric inpatient for admission of appropriateness

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examining and exhausting all other less restrictive alternatives available to meet the client's needs. hospitalization by

The preliminary assessment of the need for mental health services shall be based on an interview with the client to information in the following areas:

<u>a</u>

- Identifying information (see Section 130.150(a)); 7
- Extent, nature, and severity of presenting problem(s); 5
- Present level of functioning (self-reported). 3
- health services shall be initiated within five working days of the request by the client or immediately in a crisis situation, as The preliminary assessment and determination of the need for mental specified in Section 130.230 (b). ૦
- the specific mental health service(s) and the initiation of services. If the client is determined to be in need of immediate crisis intervention services (see Section 130.230(b)), a mental health assessment shall not be required prior to the initiation of A client determined to be in need of mental health services shall receive a mental health assessment prior to the determination of crisis services.

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client's guardian, if applicable, unless the client is determined to be in need of crisis intervention services, or if the assessment provider shall obtain informed consent from the client and the prior to the initiation of the mental health assessment, is court-ordered for the client.

(e

- the include, at a minimum, assessment and written report of the following: mental health assessment shall The (j
- Personal and family history including the history of mental illness in the family; 7

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- attitudes), perceptual disturbances, thought content, speech, and affect; and an estimation of the ability and willingness information, memory, (attention, to participate in treatment; functioning Cognitive 5
- History of mental health treatment; 3
- Present level of functioning including social adjustment and daily living skills; 4

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- (guardianship, representative payee, trust beneficiary, pending court order); Legal status 2
- Level of education and/or specialized training; 6
- skills, acquired vocational activities/interests, if applicable; the employment and Previous 2
- History of and/or current alcohol/chemical dependency; 8
- Previous and current psychotropic medications, last physical examination, and any known medical problems; 6
- Resource availability (income entitlements, health benefits, subsidized housing, social services, etc.). 10
- During the mental health assessment, the client and the client's guardian, if applicable, shall be informed of services offered by the provider and shall be apprised of the client's rights in accordance with Chapter 2 of the Code (Ill. Rev. Stat. 1989, ch. 911, pars. 2-101 et seq.). 8
- Responsibility for the completed mental health assessment shall be conducted by a QMHP and shall include at a minimum one face-to-face supervision of a QMHP may participate in the mental health assessment pursuant to Section 130.160 (c). The assessment may be conducted in the provider's clinic and/or in other locations contact with the client and his/her family, at the client's request or by agreement of the client when the family can provide pertinent information or support, and the client's guardian, if applicable. Other mental health professionals who are under the direct jails, and other community locations. The mental health assessment including, but not limited to, the client's own home, hospitals, shall not require physician prescription and direction. E
- the directing physician documented by a signed and dated progress note or date and signature on the assessment with a statement and necessary in order to evaluation, if applicable, shall be conducted by the physician on a if applicable, shall be conducted by a licensed psychologist, on a face-to-face basis with the client. If the mental health assessment is not conclusive and the client's diagnosis is deferred The results of the mental health assessment shall be reviewed by evaluation The psychlatric face-to-face basis with the client. The psychological evaluation, or a rule-out diagnosis is given, the provider has 30 days to he/she shall make a determination if a psychiatric develop the client's individual treatment plan. a psychological evaluation is and/or

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determine the client's mental health needs and treatment. In instances when the diagnosis still cannot be determined or a rule-out diagnosis is given, the client's record must contain documentation as to what evaluations will be performed in order to provide a definitive diagnosis in the individual treatment plan.

j) The assessment report(s), including the mental health assessment and the psychiatric and psychological evaluation, if applicable, shall be utilized in the development of the client's individual treatment plan.

Section 130.210 Treatment plan development and modification

- a) The individual treatment plan (ITP) shall be developed with the participation of the client and the client's guardian, if applicable. The plan shall be signed by the client if 12 years of age or older or by the parent or legal guardian of a minor or by the legally appointed guardian of an adult who has been adjudicated as legally disabled, the QMHP and the physician who is directing the formulation of the individual treatment plan. A copy of the signed plan shall be given to the client, if not clinically contraindicated, and the client's parent or guardian, if applicable, and incorporated in the client's record.
- b) The provider shall explain to the client and to the client's guardian, if applicable, the process for the development and the contents of the ITP.
- c) The ITP shall be developed within 30 days of the documented date of completing the mental health assessment. The ITP shall include a definitive diagnosis that has been determined using the Diagnostic and Statistical Manual of Mental Disorders, Third Edition revised (DSM-III-R, American Psychiatric Association 1987 edition or the International Classification of Diseases, Third Edition (ICD-9), World Health Organization, (1989 edition).
- d) The ITP shall state the overall goals of treatment and shall indicate the specific mental health services to be provided, in accordance with the following:
- Describe the mental health service needs of the client in relationship to the mental health service(s) to be provided;
- 2) Contain a statement relating to the goals, objectives and expected outcome(s) for the specific mental health service(s) provided to the client. The statement shall specify for each

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- A) Long-term goals and specific intermediate objectives stated sequentially;
- Planned intervention related to accomplishing the objectives including the frequency, quantity and duration of services;
- C) Date(s) on which each service objective was set and the expected length of service; and
- D) Identification of the professional staff with responsibility for managing each service objective.
- E) The ITP shall be under the direction of a physician, pursuant to Section 130.160(b). The QMHP shall participate in the development of the ITP under physician direction, pursuant to Section 130.160(c). Other mental health professionals who are under the direct supervision of the QMHP, pursuant to Section 130.160(c) may also participate in the development of the individual treatment plan.
- f) Clients who receive more than one type of mental health service shall have an individual treatment plan developed, reviewed, and modified, as necessary, by the team of individuals responsible for providing the respective services.
- g) The ITP shall be reviewed and modified, as necessary, semi-annually, at a minimum, for adult clients and quarterly, at a minimum, for children and adolescents by the directing physician and the qualified mental health professional(s) involved in the formulation, implementation, and supervision of the ITP.
- h) If multiple providers are providing mental health services to the client, one master ITP shall be developed by the team of individuals responsible for providing the respective services.

Section 130.220 Psychiatric treatment

a) Service requirements

Psychiatric treatment services shall be provided to clients of all ages who require interpersonal therapy and/or psychotropic medication to promote growth in role functioning or to maintain role functioning in order to assist the client in functioning in the community.

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- psychotropic medication requirements Psychiatric treatment include: â
- Psychotropic medication shall be prescribed by a physician licensed in accordance with the Medical Practice Act of 1987, who has conducted a psychiatric evaluation of the client, or in an emergency, is aware of the client's psychotropic medication history and the client's current level of functioning. 7
- Psychotropic medication shall be administered by personnel licensed to administer medication pursuant to The Illinois Nursing Act of 1987 and the Medical Practice Act of 1987. 7
- Psychotropic medication shall be reviewed every 90 days, at a minimum, by the physician. 3
- Psychotropic medication shall be monitored and training shall be provided to clients in the following areas: 7
- Psychiatric illness; P
- side-effects, Psychotropic medications, effects and adverse reactions; (A
- Self-administration of medications; ວ
- Storage and safeguarding of medication; and â
- professionals health mental regarding medication issues. with Communicating
- Notation shall be made in the client's clinical record of other types and medication medication. Notations shall include: regarding psychotropic 2
- All medication being taken by the client; **a**
- dosage, frequency, and method of administration; medication: psychotropic Current B)
- resulting from psychotropic medication administration; implemented to address any Activities ົວ

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- A statement indicating that the client has been informed of the purpose of the psychotropic medication ordered and the side effects of the medication. 6
- Psychotropic and other medication shall be stored sanitation, temperature, segregation, security accordance with 77 Ill. Adm. Code 300.1640. moisture, ventilation, proper conditions of 6
- Psychotropic medication monitoring and training shall be provided by the physician, by a QMHP under the direction of a physician, or by a MHP, under the supervision of a QMHP pursuant to Sections 130.160(a) and (c). The physician must the professionals who provide medication monitoring and training services, as medication monitoring and training staff. in writing, designate, 2
- Psychiatric treatment primary therapy shall include: ္
- Individual therapy; 7
- Group therapy; 6
- marital (includes couples' therapy and Family therapy counseling); 3
- On-going assessment and individual treatment plan review; and 4
- Transportation, pursuant to Section 130.190(d). 2
- services shall be provided: The Ŧ
- Following a mental health assessment consistent with the client's ITP; 7
- On a face-to-face or personal contact basis with clients, groups of clients and their families, at the client's request or agreement or based on the treatment plan; 7
- In the provider's clinic; or, 3
- In other locations such as the client's own home or other appropriate community locations with justification in the client's clinical record. 3
- Service eligibility and termination criteria **e**

NOTICE OF PROPOSED REPEALER

Service eligibility criteria shall include: 7

or in Determination that the client's role functioning, is 70 below as assessed using the GAF or CGAS Scales when not crisis (see Section 130.230(b)(1)).

Service termination criteria shall include: 6 role the has functioning and the personal distress level improved and has been maintained consistent with oĘ client's level individual treatment plan; or the that Determination (Y

functioning has significantly deteriorated to a degree role where referral or a transfer to a more intensive mental health treatment is indicated; or oĘ client's level the that Determination â

Documentation in the client's clinical record that the client terminated participation in the program. ວ

Staffing Ç

Psychiatric treatment services shall be delivered by or prescribed by a physician and delivered by a QMHP, pursuant to Section 130.160(a).

Section 130.230 Crisis intervention

Service requirements a)

all ages who are experiencing a psychlatric crisis and a high intensive treatment to reduce symptomatology, stabilize and level of personal distress to provide brief and immediate, restore the client to a previous level of role functioning and to assist the client in functioning in the community. Crisis intervention services shall be provided to clients of 7

Crisis intervention shall include: 5 Immediate preliminary assessment; ¥

Therapy (brief and immediate); â

other with consultation Referral, linkage and consultation appropriate mental health services; and ပ

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NOTICE OF PROPOSED REPEALER

Transportation, pursuant to Section 130.190(d). â

3

Crisis intervention services shall provide immediate crisis psychiatric hospitalization by examining and exhausting all other less restrictive alternatives available to meet the assessment to ensure the appropriateness of admission for other less restrictive alternatives available to meet client's needs.

Services shall be provided on a face-to-face basis, following, at a minimum, a preliminary assessment (see Section 130.200(b)) of the need for mental health services. A preliminary ITP shall be developed and incorporated into the ITP, if continuing mental health services are provided. 4

Services shall be provided in the provider's clinic and/or other locations such as the client's own home/residence, hospitals, jails, and other community locations. 2

residential crisis care, respite care, and/or inpatient psychiatric treatment, as determined by a QMHP under the Access, referral, and linkage with continuing mental health services shall be provided for clients in crisis, including supervision of a physician or prescribed by a physician. 6

Service eligibility and termination criteria

all ages presenting an apparent need for immediate mental health services. Service eligibility criteria shall include: Crisis intervention services shall be available to persons of 7

Determination of deterioration in one or more areas of role functioning within the past seven days and which requires immediate resolution and stabilization to prevent further deterioration in role functioning; or ¥

requires substantial ဌ symptomatology deterioration in role functioning and prevent ţ acute immediate stabilization that personal distress. Determination B

a QMHP under the Service termination criteria assessed by supervision of a physician shall include: 5

client shows positive change toward restoration to a previous level of role functioning and/or decrease in Determination that the crisis has been resolved and the ¥

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personal distress and is not in need of further mental health services; or

- requires a transfer or referral to less intensive mental health treatment for continuing mental health Determination that the client has been stabilized but **a**
- Determination that the client has not been stabilized and the client requires a transfer or referral to more intensive mental health treatment for continuing mental health services; or ວ
- Documentation in the client's clinical record that client terminated participation in the program. 6

Staffing ច

- prescribed by a physician and delivered by a QMHP pursuant to Sections 130.160(a), (b) and (c). Physician prescription, however, shall not be required prior to service initiation but shall be secured within five working days of service provision. The QMHP may also be assisted by other mental health professionals, who are under the direct supervision of Crisis intervention services shall be delivered by the QMHP pursuant to Section 130.160(c). 7
- and acuity in mental health assessment, crisis intervention techniques, and effective clinical decision making under Crisis intervention staff shall be selected for experience emergency conditions. 7
- necessary, after the regular hours of operation. Written agreements shall be established for referral of clients to The number of crisis intervention staff shall be adequate to provide immediate crisis assessment, brief therapy, and during the regular hours of service operation and at a minimum, provide crisis assessment and referral to mental health services, as crisis intervention services after regular operating hours, referral and linkage on a face-to-face basis 3

Section 130.240 Day treatment

Service requirements a)

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- extended treatment and rehabilitation services provided on an integrated, comprehensive and complimentary schedule of psychiatric and psychosocial treatment modalities addressing treatment shall include intensive stabilization at least three areas of functioning: 7
- Psychological; ¥
- Interpersonal; and B
- Primary role. ວ
- example, services identified in the individual education plan Day treatment for individuals under the age of 21 years shall not include services that are educational in nature; 5
- rehabilitation services shall include a range of therapeutic interventions provided in a therapeutic milieu following a mental health assessment, consistent with the client's ITP. extended treatment and stabilization Intensive 3
- short-term problems or crisis situations which, if not treated, would require inpatient psychiatric hospitalization of interventions focused on resolution or stabilization of increments for a maximum of four hours daily with a schedule Intensive stabilization services shall be billable in hourly including the provision of the following: 4
- Therapy (individual, group and family); ¥
- Occupational therapy; â
- On-going assessment and treatment plan review; and ົວ
- Transportation, pursuant to Section 130.190(d). 6
- available for a minimum of four hours daily with a schedule rehabilitation services shall be of interventions focused on the development, acquisition, enhancement and/or maintenance of interpersonal and living into the family and community, including the provision of the skills to restore client functioning, facilitate re-entry and Extended treatment 2
- Therapy (individual, group and family);

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Occupational therapy;

â ວ

- Skills development and training;
- On-going assessment and treatment plan review; and 6
- Transportation, pursuant to Section 130.190(d).
- Service eligibility and termination criteria Э
- intensive stabilization shall include determination that the client: criteria eligibility service Specific 7
- and associated features of role functioning in one or more primary areas, which requires immediate intervention to prevent further deterioration and the need for 24-hour supervised mental illness and has experienced deterioration treatment, e.g. hospitalization; or symptoms Exhibits signs, ¥
- further continuation of treatment following zation because symptoms persist and role hospitalization because symptoms functioning has not improved. Requires æ
- Specific service eligibility criteria for extended treatment and rehabilitation shall include determination that: 5
- 28 below or assessed using the GAF or CGAS Scales; is role functioning The client's ¥
- and/or is maintain community adjustment without The client lacks independent living skills, structured intervention; unable â
- The client has a sufficient level of stress tolerance increasing participation in a structured extended rehabilitation planned attendance program. ç ວີ
- Termination criteria 3
- intensive for criteria stabilization shall include: termination General A)
- Determination that the client's level of acute previous distress/crisis has been resolved and 1)

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with consistent restored treatment plan objectives; or functioning

- record in the that the client terminated participation clinical Documentation in the client's program. 11)
- General termination criteria for extended treatment and rehabilitation shall include: â
- functioning has improved, and the rehabilitation obtained and maintained consistent with the treatment plan; or Determination that the client's level of objectives have been 1
- CGAS the extended rehabilitation services objectives have not been obtained consistent with the Scales, has not improved or has deteriorated and functioning as assessed using the GAF or Determination that the client's level treatment plan; or 11)
- Documentation in the client's clinical record that the client terminated participation in the program. 111)

Staffing ပ

- rehabilitation services shall be prescribed by a physician and delivered by a QMHP, or by an MHP under the direct supervision of the QMHP, pursuant to Sections 130.160 (a).(b) treatment extended and stabilization 7
- Intensive stabilization services shall have a minimum of one full-time equivalent (FTE) mental health professional to every six adult clients (1:6) or 1:3 for child and adolescent based on average daily attendance calculated clients, annually. 7
- Extended treatment and rehabilitation services shall have a minimum of one FTE mental health professional to 10 adult clients (1:10) or 1:6 to child and adolescent clients, based on average daily attendance calculated annually. e

Case management Section 130.250

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Service requirements a)

- recreational, housing, public income entitlements, and other ages who require assistance in gaining access to mental health services and to "social, educational, vocational, community services to assist the client in functioning in the Case management services shall be provided to clients of all 7
- Case management shall include: 5
- Linkage with a continuum of mental health services; **A**
- Linkage with basic resources, which may include: (A
- Applying for financial, medical and other public entitlements; Ę
- Locating housing; 11)
- Obtaining medical and dental care; 111)
- Obtaining other social, educational, vocational, and recreational services. 1v)
- Client-specific advocacy and assistance with problem solving/resolution to assist the client in building community support and family support systems; and ວ
- Transportation, pursuant to Section 130.190(d). â
- restaurants, or neighborhood centers), at the client's request or agreement or based on the treatment plan, health assessment consistent with the client's ITP (except that immediate assistance may be provided to obtain food, management services shall be provided following a mental shelter and clothing, if needed) on a face-to-face basis or personal contact basis with the client, his/her family, or other persons (such as employees of the public aid offices, outreach basis in the client's home/residence or other appropriate community locations. on an primarily 3
- A single case manager or a team of case managers shall be for coordinating other mental health and community services responsible for providing the case management services and for each client. 4

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- Service eligibility and termination criteria <u>Q</u>
- Service eligibility criteria shall include determination 7
- assessed utilizing the GAF or CGAS Scales; and The client's role functioning is 70 or F
- two of the following types of services: mental health, or other service. Service needs must be documented in the client's ITP (for example, clients who need/receive only chemotherapy are not eligible for case management The client is currently receiving (or needs) at least medical, social, educational, rehabilitative, housing, services), or B)
- inpatient psychiatric facility and may require linkage with a provider for continuing mental health services and community/family support, and may be in need of immediate assistance in securing appropriate housing discharged from order The client is planned to be and income entitlements in Independently in the community. ວ
- Service termination criteria shall include: 5
- functioning has improved and has been maintained consistent with the individual treatment plan, and that the client is no longer in need of advocacy to support of Determination that the client's level adequate role functioning; 8
- treatment plan and is no longer in need of assistance person-to-person contact between a client and the staff of a community provider which has agreed to provide necessary services and the mutual agreement between a appropriate services are available and are likely to Determination that the client has been successfully linked with appropriate mental health services and other basic services consistent with the individual or advocacy to maintain them. Successful linkage is client and the staff of the community provider that meet the client's needs; B)
- Documentation in the client's record that the client terminated participation in the program. ວ

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c) Staffing

Case management services shall be provided by a QMHP or by an MHP under the direct supervision of the QMHP, pursuant to Section 130.160(c). Case management services shall not require physician prescription or direction.

Section 130.TABLE A Mental Health Clinic Program Adult Service Utilization Parameters

ANNUAL MAXIMUM UNITS	12 hours	6 hours	two evaluations	12 hours	24 hours	50 hours	176 hours	880 hours	240 hours	36 hours 72 hours 54 hours
AVERAGE UNITS PER SPECIFIED PERIOD	6 hours (per 6 months)	(per 12 months)	one evaluation (per 6 months)	one hour (per 90 days)	2 hours (per 30 days)	10 hours (per 30 days)	22 days (per 30 days)	22 days (per 30 days)	20 hours (per 30 days)	4 hours 8 hours 6 hours
MINIMUM UNIT BILLABLE*	15 min			15 min)	15 min	15 min	1 hour	1 day (4 hrs)	15 min	ent v) 15 min
SERVICE	Mental health assessment	Psychological evaluation (testing)	Psychiatric evaluation	Treatment plan (development and modification)	Psychotropic medication prescription, review, and monitoring & training	Crisis intervention	Day treatment/intensive stabilization	Day treatment/extended treatment and rehabilitation	Case management	Adult Psychiatric treatment individual therapy (60 min av) 15 min family therapy (120 min av) group therapy (90 min av)

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			96 hours	193 hours	144 hours	
(per 30 days)			8 hours	16 hours	12 hours	(per 30 days)
	Children/Adolescents	Psychiatric treatment	individual therapy (60 min av) 15 min	family therapy (120 min av)	group therapy (90 min av)	

Billable to the nearest quarter hour, e.g. 55 minutes is billable to one hour or to the nearest hour for day treatment, e.g. at ‡ of the day rate, if the client does not attend the typical full 4 hour day which is billable at the all inclusive full day rate.

Section 130.TABLE B Mental Health Clinic Program Children and Adolescents Service Utilization Parameters

SERVICE	MINIMUM UNIT BILLABLE*	AVERAGE UNITS PER SPECIFIED PERIOD	ANNUAL MAXIMUM UNITS
Mental health assessment	15 min	6 hours (per 6 months)	12 hours
Psychological evaluation $^{\prime}{}_{x}$ (testing)		one evaluation (per 12 months)	6 hours
Psychiatric evaluation		one evaluation (per 6 months)	two evaluations
Treatment plan (development and modification)	15 min	one hour (per 90 days)	12 hours
Psychotropic medication prescription, review, and monitoring & training	15 min	2 hours (per 30 days)	24 hours
Crisis intervention	15 min	10 hours (per 30 days)	50 hours
Psychiatric treatment individual therapy (60 min av) family therapy (120 min av) group therapy (90 min av)	15 min	8 hours 16 hours 12 hours (per 30 days)	96 hours 193 hours 144 hours
Day treatment/intensive stabilization	1 hour	22 days (per 30 days)	176 hours

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880 hours	240 hours
22 days (per 30 days)	20 hours (per 30 days)
1 hour	15 min
Day treatment/extended treatment and rehabilitation	Case management

Billable to the nearest quarter hour, e.g. 55 minutes is billable to one hour or to the nearest hour for day treatment, e.g. at \$ of the day rate, if the client does not attend the typical full 4 hour day which is billable at the all inclusive full day rate.

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NOTICE OF PROPOSED AMENDMENTS

- 1) Heading of the Part: Child Support Enforcement
- 2) Code Citation: 89 Ill. Adm. Code 160

Proposed Action:	New Section	New Section
3) Section Numbers:	160.77	160.85

Sections 4-1.7, 10-1 et seg., 12-4.3, and 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, pars. 4-1.7, 10-1 et seq., 12-4.3 and 12-13) Statutory Authority: 4)

Complete Description of the Subjects and Issues Involved:

information concerning past-due support to State licensing agencies under Department takes to serve process when necessary to establish, modify, or The Department is proposing two additions to its rules governing child certain conditions. The second addition defines the efforts which the support enforcement. The first addition provides for reporting enforce support.

which was added by Public Act 87-412 (House Bill 2486), effective January Security Number and terms and amount of past-due support in response to a notification from a State licensing agency. The report will be made when Under the possesses a license and owes past-due child support in excess of \$1,000. Opportunities to appeal the release of the information are specified in The first addition is proposed new Section 160.77. This new Section is It authorizes the Department to provide information to State intended to implement Section 10-17.6 of the Illinois Public Aid Code proposed rules, the Department will report the name, address, Social the individual has applied for issuance or renewal of a license or licensing agencies concerning past-due child support amounts. the proposed rule.

connection with child support enforcement. Although service of process is court has discretion to require that summons be served in post-judgment proceedings. Section 160.85 will apply in all situations in which service required by the federal Family Support Act and final federal regulations (45 CFR 303.3(c) adopted at 54 FR 32310). The federal law requires normally required only in the establishment phase of a support case, the The second addition is proposed new Section 160.85. This new Section is establishment of guidelines defining efforts to serve process in of process is required.

The Department does not believe that these proposed amendments will have any significant fiscal impact.

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

- 6) Will these proposed amendments replace emergency amendments currently in effect? No
- 7) Dogs this rulemaking contain an automatic repeal date?
- 8) Do these proposed amendments contain incorporations by reference? No
- Yes. 9) Are there any other proposed amendments pending on this Part?

Illinois Register Citation Proposed Action Sections

Amendment 160.30

February 14, 1992 (16 Ill. Reg. 2406)

- Statement of Statewide Policy Objectives: These proposed amendments do not affect units of local government. 10)
- must be in writing and should be addressed to Kenneth E. Mitchell, Chief, South Grand Ave. E., 3rd Floor, Springfield, Illinois 62762. The Department will consider all written comments it receives within 30 days Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 11) Time, Place, and Manner in which Interested Persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning this proposed rulemaking. All comments after the publication of this notice.
- 12) Initial Regulatory Flexibility Analysis:
- Date proposed rulemaking was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: Not applicable A)
- Types of small businesses affected: None B)
- Reporting, bookkeeping or other proedures reguired for compliance: ົວ
- Types of professional skills necessary for compliance: â

The full text of the Proposed Amendments begins on the next page:

ILLINOIS REGISTER

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DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

CHAPTER I: DEPARTMENT OF PUBLIC AID SUBCHAPTER f: COLLECTIONS TITLE 89: SOCIAL SERVICES

CHILD SUPPORT ENFORCEMENT PART 160

SUBPART A: CHILD SUPPORT ENFORCEMENT

160.5	Incorporation By Reference Definitions
160.10 160.20	Child Support Enforcement Program Assignment of Rights to Support
	SUBPART B: COOPERATION WITH CHILD SUPPORT ENFORCEMENT
Section	
160.30	Cooperation With Support Enforcement Program
160.35	Good Cause For Failure to Cooperate With Support Enforcement
160.40	Proof of Good Cause For Failure to Cooperate With Support Enforcement
160.45	Suspension of Child Support Enforcement Upon Finding of Good (

ORDERS AND MODIFICATION OF SUBPART C:

Cause

Establishment of Support Obligations	Modification of Support Obligations	SUBPART D: ENFORCEMENT OF CHILD SUPPORT ORDER:		Enforcement of Support Orders	Referral to State Licensing Agencies	Withholding of Income to Secure Payment of Support	Amnesty - 20% Charge	Diligent Efforts to Serve Process
Section	160.65		Section	160.70	160.77	160.75	160.80	160.85

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PAYMENTS
SUPPORT
CHILD
EARMARKING
 Ш
SUBPART

	t Fayments
	acddns
	Child
	Earmarking
section	160.90

SUBPART F: DISTRIBUTION OF SUPPORT COLLECTIONS

Section
160.100 Distribution Of Child Support For AFDC Recipients
160.110 Distribution Of Child Support For Former AFDC Recipients Who
160.120 Continue To Receive Child Support Enforcement Services
160.120 Distribution Of Child Support Collected While The Client Was An
AFDC Recipient, But Not Yet Distributed At The Time The AFDC Case
1s Cancelled
160.130 Distribution Of Intercepted Income Tax Refunds and Other State
Payments
160.132 Distribution of Child Support for Non-AFDC Clients

Payments
160.132 Distribution of Child Support for Non-AFDC Clients
160.134 Distribution of Child Support For Interstate Cases
160.136 Distribution of Support Collected in IV-E Foster Care Maintenance

160.138 Distribution of Child Support for Medical Assistance No Grant Cases

SUBPART G: STATEMENT OF CHILD SUPPORT ACCOUNT ACTIVITY

160.140 Statement Of Child Support Account Activity

SUBPART H: DEPARTMENT REVIEW OF DISTRIBUTION OF CHILD SUPPORT

160.150 Department Review Of Distribution Of Child Support For AFDC
Recipients
160.160 Department Review Of Distribution Of Child Support For Former AFDC
Recipients

AUTHORITY: Implementing and authorized by Sections 4-1.7, 10-1 et seq., 12-4.3, and 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991 1989, ch. 23, pars. 4-1.7, 10-1 et seq., 12-4.3 and 12-13)

SOURCE: Recodified from 89 III. Adm. Code II2.78 through II2.86 and II2.88 at 10 III. Reg. 11928; amended at 10 III. Reg. 1990, effective November 14, 1986; emergency amendment at 11 III. Reg. 4800, effective March 5, 1987, for a maximum of 150 days; amended at 11 III. Reg. 9129, effective April 30, 1987; amended at 11 III. Reg. 15208, effective December 31, 1987; emergency amendment at 11 III. Reg. 1563, effective December 31, 1987; emergency amendment amended at 12 III. Reg. 9065, effective May 16, 1988; amended at 12 III. Reg. 20835, effective December 2, 1988; emergency amended at 12 III. Reg. 2278, effective December 2, 1988; amended at 13 III. Reg. 4268, effective March 21, 1989; amended at 13 III. Reg. 7761, effective May 22, 1989; amended at 13 III. Reg. 16768, effective October 12, 1989; amended at 14 III. Reg. 18759, effective Movember 9, 1990; amended at 16 III. Reg. 1011. Reg.

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DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

NOTE: CAPITALIZATION DENOTES STATUTORY LANGUAGE.

SUBPART D: ENFORCEMENT OF CHILD SUPPORT ORDERS

Section 160.77 Referral to State Licensing Agencies

- The Department shall, upon request of State licensing agencies, provide the following information concerning the payment records of responsible relatives in IV-D cases to such agencies when the amount of past-due support exceeds \$1,000 and the responsible relative is not subject to the income withholding provisions of the support statutes:
- the name, last known address and Social Security Number of the responsible relative; and
- the terms and amount of past-due support which has accumulated under the order for support.
- The Department shall provide the responsible relative with a notice at least 30 days prior to furnishing past-due support information to a State licensing agency, which advance notice shall inform the relative of the following:
- 1) the IV-D case name and identification number;
- 2) the past-due support amount which will be reported;
- 3) the date past-due support will be reported; and
- 4) the right to prevent reporting by payment of the past-due support amount in full or to contest the determination of the amount of past-due support by requesting a redetermination by the Department.
- c) The Department shall provide the responsible relative with notice of the results of the redetermination and the right to prevent reporting by payment in full of the past-due support found to be owed or to contest the results of the redetermination by requesting a hearing within 30 days from the date of mailing of the notice.
- d) The Department shall proceed in accordance with 89 Ill, Adm. Code 104.103 upon receipt of a request for hearing.

(Added at 16 Ill. Reg. ____, effective

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Diligent Efforts to Serve Process Section 160.85

The Department shall make diligent efforts to serve process upon a responsible relative when necessary to establish, modify or enforce support under Sections 150.50, 150.65 and 160.70, as follows:

- The Department shall obtain information concerning: (d
- The responsible relative's whereabouts, including without limitation: T
- the relative's home address; A
- the address of the relative's employer; B
- the addresses of family and friends who might know of the relative's whereabouts; or ฮ
- places frequented by the relative; and a
- the responsible relative's identification, including without limitation: 7
- the relative's Social Security Number; or A
- the relative's physical description. a
- The Department shall furnish such information to the Sheriff or other process server; and 4
- When sufficient whereabouts and identification information for service continue to exist, the Department shall cause an alias summons to issue: d
- as soon as practicable after the first "not found" return; and 7
- anytime new information is obtained; and 7
- six months after each "not found" return, until service is effected. 3

effective (Added at 16 Ill. Reg.

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NOTICE OF PROPOSED AMENDMENTS

The Heading of the Part: FOOD STAMPS

7

- Code Citation: 89 Ill. Adm. Code 121 5
- Proposed Action: Section Number: 3

121.25

Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1989, Ch. 23, Par. 12-13) Statutory Authority: 4

Amendment

- GA individuals from participation in the Food Stamp Program A Complete Description of the Subjects and Issues Involved: This rulemaking disqualifies nonexempt Downstate for two months for noncompliance with Downstate GA Employment and Training requirements. 2
- Will these Proposed Amendments replace Emergency Amendments currently in effect? No 6
- Does this rulemaking contain an automatic repeal date? 7
- Do these Proposed Amendments contain incorporations by reference? No 8
- Are there any other Proposed Amendments pending on this Part? Yes 6

Section Numbers 121.58 121.63 121.63	Proposed Action Amendment Amendment Amendment	Amendment February 14, 1992 (16 Ill. Reg. 2420) Amendment February 14, 1992 (16 Ill. Reg. 18086) Amendment February 14, 1992 (16 Ill. Reg. 18086) Amendment April 24, 1992 (16 Ill. Reg. 6708)
121.73	Amendment	(16 III. Reg. 2420) February 14, 1992 (16 III. Reg. 2420)

October 4, 1991 (15 111. Reg. 14186)

Amendment

121.91

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

Section Numbers Proposed Action Illinois Register Citation

121.94

Amendment

October 18, 1991 (15 Ill. Reg. 14999) 10) Statement of Statewide Policy Objectives: This rulemaking has no effect on local governmental units.

11) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments concerning the proposed rulemaking. All comments must be in writing and should be addressed to Judy Umunna, Bureau of Rules and Regulations, Illinois Department of Public Aid, Jesse B. Harris Building II, 100 South Grand Avenue East, 3rd Floor, Springfield, Illinois 62762 (217) 524-3215. The Department will consider all written comments it receives within 30 days of the date of publication of this notice.

12) Initial Regulatory Flexibility Analysis:

A) Date Proposed Amendment was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: Not applicable

B) Types of small businesses affected: Not applicable

C) Reporting, bookkeeping or other procedures required for compliance: Not applicable

D) Types of professional skills necessary for compliance: Not applicable

The full text of the Proposed Amendment begins on the next page:

ILLINOIS REGISTER DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

TITLE 89: SOCIAL SERVICES CHAPTER I: DEPARTMENT OF PUBLIC AID SUBCHAPTER b: ASSISTANCE PROGRAMS

PART 121 FOOD STAMPS

SUBPART A: APPLICATION PROCEDURES

Section 121.1 121.2 121.3 121.4 121.5 121.6 121.7		Application for Assistance	Time Limitations on the Disposition of an Application	Approval of an Application and Initial Authorization	of Assistance	Denial of an Application	Client Cooperation	Emergency Assistance	Expedited Services	Interviews	
	Section	121.1	121.2	121.3		121.4	121.5	121.6	121.7	121.10	

SUBPART B: NON-FINANCIAL FACTORS OF ELIGIBILITY

DEPARTMENT OF PUBLIC AID

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Section

Income From Rental Property Earned Income In-Kind Sponsors of Aliens Assets Exempt Assets Asset bisregards	SUBPART D: ELIGIBILITY STANDARDS	Net Monthly Income Eligibility Standards
121.53 121.54 121.55 121.57 121.58		Section 121.60

121.60 Net Monthly Income Eligibility Standards 121.61 Gross Monthly Income Eligibility Standards 121.62 Income Which Must Be Annualized 121.63 Deductions From Monthly Income 121.64 Coupon Allotment

SUBPART E: HOUSEHOLD CONCEPT

Section 121.70 Persons Who May Be Included in the Assistance Unit 121.71 Living Arrangement 121.72 Nonhousehold Members 121.73 Ineligible Household Members 121.74 Strikers 121.75 Students

MISCELLANEOUS PROGRAM PROVISIONS

SUBPART F:

u) Fraud Disgualification (Renumbered)															Project (Repealed)			Children
Section	121.80	121.81	121.82	121.83	121.84	121.85	-121.90	121.91	121.92	121.93	121.94	121.95	121.96	121.97	121.98		121.120	121.130	

12 - 3)

SOURCE: Adopted December 30, 1977; amended at 3 III. Reg. 5, p. 875 effective February 2, 1979; amended at 3 III. Reg. 31, p. 109, effective August 3, 1979; amended at 3 III. Reg. 33, p. 359 effective August 18, 1979; amended at 3 III. Reg. 41, p. 165, effective October 11, 1979; amended at 3 III. Reg. 41, p. 230, effective October 19, 1979; amended at 3 III. Reg. 44, p. 173, effective October 19, 1979; amended at 3 III. Reg. 44, p. 36, effective November 2, 1979; amended at 3 III. Reg. 47, p. 96, effective November 13, 1979; amended at 3 III. Reg. 48, p. 1; effective November 15, 1979; peremptory amendment at 4 III.

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DEPARTMENT OF PUBLIC AID

AMENDMENTS
PROPOSED
NOTICE OF

Section 121.135	Incorporation By Reference
121.140	Small Group Living Arrangement Facilities and Drug/Alcoholic Treatment Centers

SUBPART G: INTENTIONAL VIOLATIONS OF THE PROGRAM

Section		
121.150		
121.151	Penalties for Intentional Violations of the Program	
121.152	Notification To Applicant Households	
121.153	Disqualification Upon Finding of Intentional	
,	Violation of the Program	
121.154	Court Imposed Disqualification	
SUBPART !	H: CLAIMS FOR OVERISSUANCES OF FOOD STAMP BENEFITS	
Section		
121.200	Types of Claims (Recodified)	
121.201	Establishing a Claim for Intentional Violation of	
	the Program (Recodified)	
121.202	Establishing a Claim for Unintentional Household	
	Errors and Administrative Errors (Recodified)	
121.203	Collecting Claim Against Households (Recodified)	
121.204	Failure to Respond to Initial Demand Letter	
	(Recodified)	
121.205	Methods of Repayment of Food Stamp Claims	
	(Recodified)	
121.206	Determination of Monthly Allotment Reductions	
	(Recodified)	
121.207	Failure to Make Payment in Accordance with Repayment	
	Schedule (Recodified)	
121.208	Suspension and Termination of Claims (Recodified)	
AITTHOUTTO	Imalementing Seations 12 4 through 12 4 6 and	
authorized	Implementing Sections 12-4:4 through 12-4:0 and by Section 12-13 of the Illinois Dublic Aid Code	
(Ill Rev	Stat. 1989, ch. 23, pars. 12-4 4 through 12-4 6 and	
	ביני דייי בין היוני דיי ביידי	

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

effective September 2, 1980; amended at 4 111. Reg. 45, p. 134, effective October 17, 1980; amended at 5 111. Reg. 45, p. 134, effective January 2, 1981; amended at 5 111. Reg. 4586, effective January 16, 1981; amended at 5 111. Reg. 4586, effective January 16, 1981; amended at 5 111. Reg. 4586, effective January 16, 1981; amended at 5 111. Reg. 1071, effective June 23, 1981; peremptory amendment at 10062, effective June 23, 1981; amended at 5 111. Reg. 10733, effective October 1, 1981; amended at 5 111. Reg. 10733, effective October 2, 1981; amended at 6 111. Reg. 1653, effective October 2, 1982; amended at 6 111. Reg. 12786, amended at 6 111. Reg. 1653, effective August 9, 1982; amended at 6 111. Reg. 10208, effective October 1, 1982; amended at 6 111. Reg. 10208, effective October 1, 1982; amended at 6 111. Reg. 12318, effective October 1, 1983; amended at 6 111. Reg. 12318, effective October 1, 1983; amended at 7 111. Reg. 12318, effective October 1, 1983; peremptory amendment at 7 111. Reg. 12899, effective October 4, 1983; peremptory amendment at 7 111. Reg. 1365, effective June 24, 1983; peremptory amendment at 7 111. Reg. 1669, effective November 2, 1983; amended at 7 111. Reg. 1669, effective November 2, 1983; peremptory amendment at 7 111. Reg. 1669, effective November 2, 1983; amended at 8 111. Reg. 1669, effective April 18, 1984; amended at 8 111. Reg. 1669, effective April 18, 1984; amended at 8 111. Reg. 1086, effective July 1, 1984; amended at 8 111. Reg. 1086, effective July 1, 1984; amended at 8 111. Reg. 1086, effective July 1, 1984; amended at 8 111. Reg. 1086, effective July 1, 1984; amended at 8 111. Reg. 1086, effective July 1, 1984; amended at 8 111. Reg. 1084; amended at 8 1 Reg. 3, p. 49, effective January 9, 1980; peremptory amendment at 4 Ill. Reg. 9, p. 259, effective February 23, 1980; amended at 4 Ill. Reg. 10, p. 253, effective February 27, 1980; amended at 4 Ill. Reg. 12, p. 551, effective March 10, 1980; emergency amended at 4 Ill. Reg. 29, p. 294, effective July 8, 1980 for maximum of 150 days; amended at 4 Ill. Reg. 37, p. 797, 22145, effective November 1, 1984, amended at 9 111. Reg. 302, effective January 1, 1985; amended at 9 111. Reg. 6804, effective May 1, 1985; amended at 9 111. Reg. 8665, effective May 29, 1985; peremptory amendment at 9 111. Reg. 8898, effective July 1, 1985; amended at 9 111. Reg. 11334, effective July 8, 1985; amended at 9 Ill. Reg. 14334, effective September adding section being codified with no substantive change) at 8 Ill. Reg. 17898; peremptory amendment at 8 Ill. Reg. 19690, effective October 1, 1984; peremptory amendment at 8 Ill. Reg. October 1, 1985; amended at 9 III. Reg. 16889, effective October 16, 1985; amended at 9 III. Reg. 19726, effective December 9, 1985; amended at 10 III. Reg. 229, effective December 20, 1985; peremptory amendment at 10 III. Reg. 7387, effective April 21, 1986; peremptory amendment at 10 III. Reg. 6, 1985; peremptory amendment at 9 Ill. Reg. 15582, effective

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effective June 1, 1988; amended at 12 III. Reg. 11463, effective June 30, 1988; amended at 12 III. Reg. 12824 effective July 22, 1988; amended at 12 III. Reg. 12824 effective July 22, 1988; amended at 12 III. Reg. 12824 l4045, effective August 19, 1988, for a maximum of 150 days; peremptory amendment at 12 III. Reg. 15704, effective October 1, 1988; peremptory amended at 12 III. Reg. 16271, effective November 30, 1988; amended at 13 III. Reg. 3890, effective Amarch 10, 1989; amended at 13 III. Reg. 13619, effective August 14, 1989; peremptory amendment at 13 III. Reg. 15859, effective January 1, 1990; amended at 14 III. Reg. 6349, effective Anuary 1, 1990; amended at 14 III. Reg. 13202, effective August 6, 1990; amended at 14 III. Reg. 1588, effective October 1, 1990; amended at 14 10269, effective Amaximum of 130 uays; amended at 11 111. Reg. 10261, effective May 22, 1987; amended at 11 111. Reg. 10261, effective May 25, 1987; peremptory amendment at 11 111. Reg. 11391, effective July 1, 1987; peremptory amendment at 11 111. Reg. 12043, effective July 6, 1987; amended at 11 111. Reg. 12043, effective July 6, 1987; amended at 11 111. Reg. 13635, effective August 10, 1987; amended at 11 111. Reg. 15261, effective September 1, 1987; amended at 11 111. Reg. 15480, effective September 4, 1987; amended at 11 111. Reg. 15634, effective September 11, 1987; amended at 11 111. Reg. 15634, effective September 11, 1987; amended at 11 111. Reg. 18218, effective September 11, 1987; amended at 11 111. Reg. 18218, effective September 11, effective October 30, 1987; amended at 12 111. Reg. 877, effective December 30, 1987; amended at 12 111. Reg. 877, effective December 31, 1987, for a maximum of 150 days; amended at 12 111. Reg. 877, effective May 23, 1988; amended at 12 111. Reg. 18218. 1, 1990; amended at 14 III. Reg. 16983, effective September 30, 1990; amended at 15 III. Reg. 11150, effective July 22, 1991; amended at 15 III. Reg. 11957, effective August 12, 1991; peremptory amendment at 15 III. Reg. 14134, effective October 1, 1991; emergency amendment at 16 Ill. Reg. 757, effective January 1, 1992, for a maximum of 150 days; amended at 16 Ill. Reg. 21094; peremptory amendment at 11 III. Reg. 3761, effective February 11, 1987; emergency amendment at 11 III. Reg. 3754, effective February 13, 1987, for a maximum of 150 days; emergency amendment at 11 III. Reg. 9968, effective May 15, 1987, for a maximum of 150 days; amended at 11 III. Reg. 7941, effective May 1, 1986; amended at 10 Ill. Reg. 14692, effective August 29, 1986; peremptory amendment at 10 Ill. Reg. 15714, effective October 1, 1986; Sections 121.200 thru 121.208 recodified to 89 Ill. Adm. Code 165 at 10 Ill. , effective

CAPITALIZATION DENOTES STATUTORY LANGUAGE NOTE:

NOTICE OF PROPOSED AMENDMENTS

NON-FINANCIAL FACTORS OF ELIGIBILITY .. m SUBPART

Failure to Comply Section 121.25

- The local office will determine if an individual has refused or failed to comply without good cause with work registration requirements. a)
- recipient has failed to comply with comparable GA Jobs Program requirements. The Department will take action The GA Jobs Program will determine if a GA/Food Stamp to terminate Food Stamp benefits within ten calendar days of such determination by GA Jobs Program staff. q
- The local office will take action to terminate Food Stamp benefits when it determines that an individual has failed without good cause to: G
- accept a bonafide offer of suitable employment which the household member has found through a source other than the GA Jobs Program or WDP Programs; or 1
- continue suitable employment. 5)
- with work registration or GA Jobs Program requirements Failure of any non-exempt household members to comply household being ineligible for program participation. without good cause, will result in the entire q
- participate in the Food Stamp Program for two months. In downstate receiving local governmental units, if individuals fails or refuses without good cause to requirements, the individual will be ineligible to comply with Downstate GA Employment and Training the nonexempt Downstate GA (Non-Project Chance) 白
- Good cause includes circumstances beyond the member's control, such as but not limited to, illness, illness of another household member requiring the presence of the member, lack of transportation, a household emergency or the lack of adequate child care for children age 6 through 11 as defined in Section 121.75(a)(3). e)E)

Amended at 16 Ill. Reg effective

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- The Heading of the Part: REIMBURSEMENT FOR NURSING COSTS FOR GERIATRIC FACILITIES 1
- 89 Ill. Adm. Code 147 Code Citation: 5

Proposed Action Section Numbers 3)

| Amendment |
|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | | | | | | | | | |
| 147.100 | 147.300 | 147.305 | 147.310 | 147.315 | 147.320 | 147.325 | 147.340 | 147.345 | 147.350 |

Statutory Authority: 4

89 Ill. Adm. Code 147.100

Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13)

89 Ill. Adm. Code 147.300, 147.305, 147.310, 1. 147.320, 147.325, 147.340, 147.345 and 147.350

Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13)

A Complete Description of the Subjects and Issues Involved: 2

89 Ill. Adm. Code 147.100

The IOC. A sentence has been added to (f) stating that information not presented at the exit conference will not be considered. This coincides with the requirement in (g) This proposed rule has been amended for clarification. The words "functional and" have been added to (b) in order to address both the functional and service needs during the

89 Ill. Adm. Code 147.300, 147.305, 147.310, 147.315 147, 320, 147, 325, 147, 340, 147, 345 and 147, 350

Revisions to these rules are being proposed primarily to provide for terminology changes. These terminology changes are being made to reflect language which is used in federal regulations regarding services which are provided for

DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

persons with mental illness (MI) and persons with developmental disabilities (DD). Rule references to "specialized services" for persons with MI are being changed to the term "psychiatric rehabilitation services." References to "active treatment" for persons with DD are being changed to "specialized services." The terminology change regarding "psychiatric rehabilitation services" emphasizes that the services being provided for persons with MI are nursing facility level services. Other revisions are being made to delete outdated material and to correct typographical errors.

- 6) Will these Proposed Amendments replace Emergency Amendments currently in effect? No
- 7) Does this rulemaking contain an automatic repeal date? N
- 8) Do these Proposed Amendments contain incorporations by reference? No
- 9) Are there any other Proposed Amendments pending on this Part? Yes

Section Numbers	Proposed Action	Illinois Register Citation
147.25	Amendment	March 20, 1992 (16 Ill. Reg. 4218)
147.50	Amendment	March 20, 1992 (16 Ill. Reg. 4218)
147.75	Amendment	March 20, 1992 (16 Ill. Reg. 4218)
147.TABLE D	Amendment	March 20, 1992 (16 Ill. Reg. 4218)
147.TABLE E	Amendment	March 20, 1992 (16 Ill. Reg. 4218)
147.TABLE G	Amendment	March 20, 1992 (16 Ill. Reg. 4218)
147.TABLE L	New Section	March 20, 1992 (16 Ill. Reg. 4218)

10) Statement of Statewide Policy Objectives:

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89 Ill. Adm. Code 147,100

This rulemaking has no effect on governmental units.

89 Ill. Adm. Code 147.300, 147.305, 147.310, 147.315. 147.320, 147.325, 147.340, 147.345 and 147.350

This rulemaking has no effect on governmental units.

11) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:

89 Ill, Adm, Code 147,100

Any interested parties may submit comments, data, views, or arguments concerning the proposed rulemaking. All comments must be in writing and should be addressed to Joanne Jones, Bureau of Rules and Regulations, Illinois Department of Public Aid, Jesse B. Harris Building II, 100 South Grand Avenue East, 3rd Floor, Springfield, Illinois 62762 (217) 524-3215. The Department will consider all written comments it receives within 30 days of the date of publication of this notice.

89 Ill. Adm. Code 147.300, 147.305, 147.310, 147.315, 147.320, 147.325, 147.340, 147.345 and 147.350

Any interested parties may submit comments, data, views, or arguments concerning the proposed rulemaking. All comments must be in writing and should be addressed to Joanne Jones, Bureau of Rules and Regulations, Illinois Department of Public Aid, Jesse B. Harris Building II, 100 South Grand Avenue East, 3rd Floor, Springfield, Illinois 62762 (217) 524-3215. The Department will consider all written comments it receives within 30 days of the date of publication of this notice.

12) Initial Regulatory Flexibility Analysis:

89 111, Adm, Code 147,100

- A) Date Proposed Amendments were submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: May 28, 1992
- B) Types of small businesses affected: Medical Providers
- C) Reporting, bookkeeping or other procedures required for compliance: No new procedures required.

DEPARTMENT OF PUBLIC AID

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Types of professional skills necessary for compliance: No new skills required.

a a

89 Ill. Adm. Code 147.300, 147.305, 147.310, 147.315, 147.320, 147.325, 147.340, 147.345 and 147.350

Date Proposed Amendments was submitted to the Business Assistance Office of the Department of Commerce and Community Affairs: May 28, 1992 A)

Types of small businesses affected: Medical Providers B

Reporting, bookkeeping or other procedures required for compliance: No new procedures required ົວ

Types of professional skills necessary for compliance: No new skills required.

(a

The full text of the Proposed Amendments begins on the next

page:

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DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

TITLE 89: SOCIAL SERVICES CHAPTER I: DEPARTMENT OF PUBLIC AID SUBCHAPTER d: MEDICAL PROGRAMS

REIMBURSEMENT FOR NURSING COSTS FOR GERIATRIC FACILITIES PART 147

Section	
147.5	Reimbursement For Nursing Costs For Geriatric
	ß
147.15	Comprehensive Resident Assessment
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147.315	Comprehensive Functional Assessments and
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Finance Reform Act (III. Rev. Stat. 1989, ch. 111 1/2, par. 6503-1 et seq.) and implementing and authorized by Articles III, IV, V, VI, VII and Section 12-13 of the Illinois Public Aid Code (III. Rev. Stat. 1989 1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 5-1 et seq., 6-1 et seq., 7-1 et seq., and Implementing Article III of the Illinois Health AUTHORITY:

and 140.Table H and 140.Table I at 12 Ill. Reg. 6956; amended at days; emergency expired November 28, 1989; amended at 13 Ill.
Reg. 16796, effective October 13, 1989; amended at 14 Ill. Reg.
210, effective December 21, 1989; emergency amendment at 14 Ill. Reg. 6915, effective April 19, 1990, for a maximum of 150 days; emergency amendment at 14 III. Reg. 9523, effective June 4, 1990, for a maximum of 150 days; emergency expired November 1, 1990, for a maximum of 150 days; emergency expired November 1, 1990; emergency amendment at 14 III. Reg. 14203, effective August 16, 1990, for a maximum of 150 days; emergency expired January 13, 1991; emergency amendment at 14 III. Reg. 15578, effective September 11, 1990, for a maximum of 150 days; emergency expired February 8, 1991; amended at 15 III. Reg. 2715, effective January 30, 1991; amended at 15 III. Reg. 3058, effective February 5, 1991; amended at 15 III. Reg. 3058, effective February 5, 1991; amended at 15 III. Reg. 2715, effective February 5, 1991; amended at 15 III. Reg. 6238, 13 Ill. Reg. 559, effective January 1, 1989; amended at 13 Ill. Reg. 7043, effective April 24, 1989; emergency amendment at 13 Ill. Reg. 10999, effective July 1, 1989, for a maximum of 150 Recodified from 89 Ill. Adm. Code 140.900 thru 140.912 amended at 16 Ill. Reg. 4035, effective March 4, 1992; amended at 16 Ill. Reg. 6479, effective March 20, 1992; amended at 16 effective August 28, 1991; emergency amendment at 15 Ill. Reg. 16435, effective October 22, 1991, for a maximum of 150 days; effective April 18, 1991; amended at 15 III. Reg. 7162, effective April 30, 1991; amended at 15 III. Reg. 9001, effective June 17, 1991; amended at 15 III. Reg. 13390, effective SOURCE:

CAPITALIZATION DENOTES STATUTORY LANGUAGE NOTE:

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Reconsiderations Section 147.100

- need of its residents. The facility will be given the Exit Conference. Differences between the facility and IOC assessments in batches of 20% as the case manager the IOC team regarding level of need of the residents Care (IOC) team if the facility believes the assessment does not accurately reflect the level of facility time to review the assessment prior to the resident assessment conducted by the Inspection of are to be addressed using a three-step approach: A facility may request a reconsideration of the completes them for the purpose of allowing the e
- exit conference negotiation between the facility and IOC team; 1
- central office arbitration; and
- first level review. 3
- not reconciled through negotiation, the IOC team nurse <u>functional and</u> service needs that it wishes to dispute. The facility is responsible for providing supporting data to the IOC team in an effort to reconcile the differences. When the differences are level of service it believes accurately reflects the residents' needs. The nurse will automatically request forms on which the facility must record the At the exit conference the facility must state the supportive documentation provided by the facility will provide the facility with appeal/arbitration forward the appeal/arbitration request forms and the central office for arbitration. q
- appeal negotiation and the submittal of the completed Arbitration is contingent upon exit conference arbitration request forms to the IOC team. ๋
- First level review is contingent upon the previous steps having been completed. q)
- be within 100 days of the date of the exit conference Final resolution of the reconsideration process shall which constitutes the first step of the process. е Э
- physician arbitrators, as indicated. Any information that was not presented at the exit conference will not Arbitration shall be completed by nurse and/or E)

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(continued) Section 147.100(f)

Ø satisfaction, the facility must request, in writing, first level review within ten days of receipt of the Otherwise the forty-five days after the exit conference. If the be considered. Results of the arbitration will be communicated in writing to the facility within reconsideration process will be completed without arbitration review does not resolve differences concerning disputed items to the facility's central office arbitration decision. advancing to first level review.

- The Bureau Chief or designee will reverse demonstrated that relevant evidence was not considered or finds the arbitrator's determination against the administrator's review and reasons, therefore, will be mailed to the facility within 45 days of receipt of First level review will be conducted by the Chief of the facility's request for first level review. information that was not presented at the exit the Bureau of Long Term Care or designee. Any conference and/or the arbitration will not be the arbitrator's determination only if it is Results of the weight of the evidence. considered. 6
- facility's program reimbursement for the rate period validity of all assessments. A reassessment may be conducted and will serve as the basis for the Such an examination may be triggered by but in question. The facility may request a review of this reassessment according to the specifications The Department reserves the right to examine the not limited to assessments resulting in a rate ncrease or decrease of ten or more percent. above. P

Amended at 16 Ill. Reg. (Source:

effective

Psychiatric Rehabilitation Services) Costs Determination of Program (Specialized-Section 147.300

The Department reimburses residential facilities for recent Inspection of Care (IOC) review conducted by program costs associated with the delivery of specialized-psychiatric rehabilitation services to information obtained during each facility's most individuals with mental illness, according to a)

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Section 147.300(a) (continued)

The category of facilities which is with mental illness determined to require specialisedmonths. Total program reimbursement determination is based upon IOC review criteria specified in Sections affected by Sections 147.300 through 147.350 is nursing facilities (NF) with at least one individual psychiatric rehabilitation services. IOC review assessments of 100% of the Medicaid residents are conducted in these facilities every twelve (12) 147.5 through 147.350. Department staff.

specialized services must be provided by-the-faeility-1987 (P.L. 100-203) requirements prohibit the admission of an individual who is mentally ill into nursing facilities on or after January 1, 1989, unless the state mental health authority has determined that this level of service is required. However, if an individual does not require nursing facility services, facility for thirty (30) continuous months or longer, and the resident chooses to remain in the facility, and reimbursement will be made by the Department as Agency Note: Omnibus Budget Reconciliation Act of but does require aetive-treatment-specialized_services, and the individual has resided in the determined by IOC assessments.

through 147.350 does not include services to maintain function with little supervision or in the absence of a continuous specialined-psychiatric rehabilitation generally independent individuals who are able to Reimbursement for services under Sections 147.300 services program. q

Amended at 16 Ill. Reg. effective (Source:

Service Reguirements for Individuals With Mental Illness in Residential Facilities Speetatised-Psychiatric Rehabilitation Section 147.305

must provide a continuous speeialised-psychiatric rehabilitation service Program-program for each individual as required by Section 1919(e)(1)(6)(i)-(b)(4) of the Social Security Act (42 U.S.C. 1396r). Facilities serving individuals with mental illness This program is directed toward: a)

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(continued) Section 147.305

- The acquisition of behaviors and skills necessary to reach the highest practical functional level of self-determination and independence in the areas of self-maintenance, social functioning, community living activities, and work related 7
- with the Prevention or deceleration of regression The reduction of residual psychiatric symptoms or loss of current optimal functional status. 5
- The CPP is a plan where specializedare designed to meet the individual's needs with continuity across all of the environments in which the individual lives. The CPP is a plan where specialises psychiatric rehabilitation services programming and interventions are consistently implemented throughout The speckalimed-psychiatric rehabilitation service program for each individual must be delivered through (CPP) consisting of interventions and services which the day, regardless of the individual's whereabouts. the implementation of a Comprehensive Program Plan Q
- The CPP must be developed by an Interdisciplinary Team relevant to identifying and prioritizing the individual's needs, and designing programs to address professions, disciplines or service areas that are (IDT) that includes the individual, and the the identified needs. Û
- various programs designed to address each individual's available to develop, implement and monitor the The facility must have qualified professionals identified needs. q
- Qualified professional staff must be licensed, certified, or registered, as applicable, to provide professional services by the State of Illinois. 7
- Act of 1987 (111. Rev. Stat. 1989, ch. 111, licensed pursuant to the Medical Practices A doctor of medicine or osteopathy is et seq.). 4400 - 1A
- the Illinois Nursing Act of 1987 (Ill. Rev. Stat. 1989, ch. 111, par. 3501 et seq.). A registered nurse is licensed B

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(continued) Section 147.305(d)(1)

- pursuant to the Illinois Occupational Therapy Practice Act (Ill. Rev. Stat. 1989, An occupational therapist is registered ch. 111, par. 3501-3701 et seq.). ΰ
- Rev. Stat. 1989, ch. 111, par. 5351 et seq.). A psychologist is registered pursuant to the Clinical Psychologist Licensing Act (Ill. â
- to the ch A social worker is licensed pursuant Clinical Social Work and Social Work Practices Act (Ill. Rev. Stat. 1989, 111, par. 6351 et seq.). <u>ы</u>
- Rehabilitation Counselors Certification. A rehabilitation counselor shall be certified by the Commission on 급
- Rehabilitation Services Coordinator (PRSC), identified οŧ criteria and in addition has a minimum of one year of experience working directly with persons with mental rehabilitation service program must be integrated, as an individual who meets one of the following coordinated and monitored by a Psychiatric Each individual's specialised-psychiatric е е
- A doctor of medicine or osteopathy; 7
- A registered nurse; 5
- An occupational therapist; 3
- A psychologist; 4)
- A social worker; or 2
- degree in a human services field (including, but not limited to: sociology, special education, rehabilitation counseling and psychology). An individual that has at least a bachelor's 9

Amended at 16 Ill. Reg. effective (Source:

NOTICE OF PROPOSED AMENDMENTS

Inspection of Care (IOC) Review Criteria for Section 147.310

the Evaluation of Speeialised-Psychiatric Rehabilitation_Services in Residential Facilities for Individuals with Mental

Illness

Medicaid certified facilities serving individuals with of speetattsed-psychiatric rehabilitation services for each individual in residence. The responsibility for the composition and quality of the IDT rests solely with the licensed provider. Further, a facility is fully responsible for ensuring the delivery of all 147.205, which are deemed necessary by the IDT in the Interdisciplinary Team (IDT) is a key component in a facility's ability to develop an appropriate program mental illness are required to address the needs of each individual through a continuous speeialisedservices as set forth in Sections 147.25 through speeialised-psychiatric rehabilitation services psychiatric rehabilitation service program. program for each individual. a)

rehabilitation services. The criteria identified in these sections constitute the essential elements of assess facility performance in meeting the variable The Inspection of Care review criteria, are used to individualized programs of specialised-psychiatric needs of individuals with mental illness through spee*a4*sed-psychiatric rehabilitation services. q

Amended at 16 Ill. Reg. effective (Source:

Comprehensive Functional Assessments and Reassessments Section 147.315

Comprehensive Assessments a)

Assessments must be coordinated by a Psychiatric Rehabilitation Services Coordinator (PRSC). comprehensive functional assessment as needed to supplement any preliminary evaluation conducted The interdisciplinary team (IDT) must identify prior to admission to a residential facility. the individual's needs by performing a

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(continued) Section 147.315(a)

7

- in need of speetaltsed-psychiatric rehabilitation (14) days after admission to a residential facility or notification from the Department that Pre-admission screening assessment may be used as if the assessment reflects the current condition The assessment must include: administered-no-later-than-four-(4)-days-afterpart of the comprehensive functional assessment a current resident has been identified as being administered by the IDT no later than fourteen A comprehensive functional assessment must be gomprehensive-functional-assessment-must-beadmission-or-notification.--Reports from the services. On-of-after-October-1,-1990,-aof the individual.
- Master Degree Psychiatric RN, or a Licensed Geftified-Clinical Social Worker (LCSW). Psychiatric Evaluation completed by a board countersigned by a psychiatrist, a physician, a Ph.D. clinical Psychologist, a certified psychiatrist, or when The evaluation shall include: P
- Psychiatric history with present and previous psychiatric symptoms; i)
- orientation, affect, suicidal/homicidal ideation, response to reality testing, functioning, memory functioning, ø and current attitudes and overt examination, which includes: Comprehensive mental status description of intellectual behaviors; and ii)
- Diagnostic formulation, using the Diagnostic Statistical Manual III (Revised) iii)
- Psychosocial history completed by a Social Worker or Occupational Therapist covering the following Points: B
- Personal and family history including the history of mental illness in the family; <u>;</u>

NOTICE OF PROPOSED AMENDMENTS

(continued) Section 147.315(a)(1)(B)

- willingness to participate in treatment; content, speech, and affect; and an estimation of the ability and Cognitive functioning (attention, perceptual disturbances, thought memory, information attitudes), ii)
- History of mental health treatment; iii)
- Present level of functioning including social adjustment and daily living skills; iv)
- beneficiary, pending court order); Legal status (e.g., guardianship, representative payee, trust 5
- Level of education and/or specialized training; vi)
- Previous employment and/or acquired vocational skills, if applicable; vii)
- viii) Activities and interests;
- History and/or current alcohol/chemical dependency; ix)
- Resource availability (e.g., income entitlements, health care benefits, subsidized housing, social services, etc.); and ×
- existing natural support network. Current living arrangements and xi)
- Level of Functioning Scale completed by a Social Worker or an Occupational Therapist ົວ
- or Social Worker, an Occupational Therapist Rehabilitation potential completed by a Certified Rehabilitation Counselor. â
- Recreation and leisure activities completed by an Occupational Therapist or, under the direction of an Occupational Therapist, by 白

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Section 147.315(a)(1)(E) (continued)

- Code the Activity Director (77 Ill. Adm. 300.1410(c)).
- Ø physician or by a registered nurse Physical examination completed by countersigned by a physician. <u>ب</u>
- Health assessment completed by a registered nurse which includes: 9
- ø ρλ registered nurse and countersigned Sensory and physical impairments completed by a physician or by a physician; ;
- Special treatments or procedures; ii)
- Medical history where appropriate; iii)
- Medication history where appropriate; iv)
- Oral screening; and <u>></u>
- Nutritional screening vi)
- Discharge potential completed by a Psychiatric Rehabilitation Services Coordinator or a Qualified-Social Worker. Ĥ
- professional judgment, should be performed individual's needs, which in the IDT's Other assessments, as indicated by the î
- $\mathbf{p}_{\mathbf{e}}$ The comprehensive functional assessment must used to develop a comprehensive program plan which: 5
- o£ Addresses presenting problems and areas need; A
- Identifies the individual's specific functional strengths and deficits; B)
- Addresses the reduction of symptoms and the acquisition of skills necessary for the individual to successfully move into the most facilitative environment; and ΰ

NOTICE OF PROPOSED AMENDMENTS

Section 147.315(a)(2)

- (continued)
- services without regard to the current availability of the services. Identifies the individual's need for â
- Reassessments Q
- the resident's assessment, assuring the continued review each individual and provide an analysis of this review. If needed, the appropriate IDT members will reassess the individual and revise At least every three months, the PRSC shall accuracy of the assessment. 1
- conducted in no case less often than once every twelve (12) months. Assessments are performed by and obtained from the appropriate professional in Comprehensive functional reassessments must be following areas: 5)
- Psychiatric evaluation;

A)

- Psychosocial history; â
- Level of functioning scale; ပ
- Rehabilitation potential; â
- Recreation and leisure activities; (E)
- Physical examination; E)
- Health assessment; and ව
- determined by the interdisciplinary team. Other assessments needed and performed, H

Reg.
111.
16
at
Amended
(Source:

Interdisciplinary Team (IDT) Section 147.320

representation from the professions, disciplines or service areas that are relevant to the individual's identified needs as described by the comprehensive functional assessments, and to The IDT for individuals with mental illness must include

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(continued) Section 147.320

The team collectively assigns priorities to the individual's needs to identifies the treatment needs of the individual and designing programs that meet the individual's need. develop a single comprehensive program plan (CPP).

- psychiatrist or a Ph.D clinical psychologist or a Master Degree Psychiatric RN, and a registered nurse or a LPN with responsibility for the individual. The CPP shall be developed with the participation of an IDT comprised of professionals who represent the needs of the individual. The team must, at least, include a physician; a social worker; a Psychiatric Rehabilitation Services Coordinator (PRSC); a a)
- The individual or the individual's legal guardian must participate on the team unless the individual's or the legal quardian+s-quardian's inability or unwillingness to participate is documented. Q)
- parent or advocate may participate as a member of the Upon request of the individual, the individual's IDT. ΰ
- Each individual team member collects data or utilizes previous data from assessments, interprets data, and clearly summarizes and reports findings to the IDT. Each professional team member writes recommendations regarding appropriate program and service goals. g.
- The team integrates data from the comprehensive assessments and prioritizes treatment goals and programs. е Э
- A comprehensive program plan must be developed within seven days after the completion of the comprehensive functional assessment. ()
- members participating in the development of the individual's plan, and when possible, the individual The CPP shall be signed by all Professional IDT for whom the plan was developed. <u>б</u>

NOTICE OF PROPOSED AMENDMENTS

(continued) Section 147.320

explained to the individual or legal guardian of the There must be documented evidence that the CPP was individual for whom the Plan-plan was developed. 'n

Amended at 16 Ill. Reg. effective (Source:

Comprehensive-Ga≇e-Płam-{66P} <u>Program Plan</u> (CPP) Section 147.325

of goals and objectives established by an IDT. The CPP is developed and modified, as necessary, according to the individual's needs, as identified in the comprehensive functional assessments. The assessment must be reviewed for relevancy and updated as appropriate, at least quarterly by the IDT. The CPP must be reviewed and revised by the IDT after each assessment to assure that the CPP remains relevant and Overview -- Each individual must have a CPP which is composed appropriate to meet the needs of the individual.

- The CPP must address major needs of the individual through a program of individualized services. a)
- The CPP must describe relevant interventions to reduce or stabilize symptoms of the individual's illness and support the individual toward independence. q
- designed to meet the needs of the individual across all of the environments in which he/she lives, through consistent program implementation and interventions. The plan must be a single comprehensive program ς C
- addresses the reduction of symptoms and the acquisition of skills necessary for the individual to successfully move into the most facilitative individual's comprehensive program plan. This plan A discharge plan must be developed by the interdisciplinary team as a component of the environment q
- The CPP shall be based upon each resident's assessed functioning level and shall include the following activities, as appropriate for the resident: е
- Self-maintenance training addressing topics such 1

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NOTICE OF PROPOSED AMENDMENTS

Section 147.325(e)(1) (continued)

- Physical functioning; B
- Personal care and hygiene; B)
- Grooming; ົວ
- Dressing; â
- Toileting;

(i) E

- Nutrition;
- Speech and Language; 3
- Eating habits; Ĥ
- Maintenance of personal space and possessions; $\widehat{\mathbf{I}}$
- Health maintenance; 5
- Use of medication; and R
- Self-medication program. 1
- Social functioning, addressing topics such as: 5
- Interaction and involvement family/significant others; B
- Social skills; a
- Relationships with male and/or female friends; ΰ
- Peer group involvement; â
- Leisure/recreational activities; and (E)
- Education regarding alcohol and substance apnse. E
- Community living skills addressing topics such as: 3)
- Homemaking responsibilities; a
- Cleaning, i.

NOTICE OF PROPOSED AMENDMENTS

Section 147.325(e)(3)(A) (continued)

- ii) Laundry,
- iii) Meal preparation and service,
- iv) Shopping,
- v) Financial management,
- vi) Using telephone,
- B) Use of transportation;
- C) Traveling from residence independently;
- D) Recognizing and avoiding common dangers; and
- E) Use of community services
- 4) Work related skills addressing topics such as:
- A) Job retention behaviors;
- i) Promptness,
- ii) Regular attendance
- iii) Relationships with
 co-workers/supervisors,
- iv) Work quality,
- v) Work quantity,
- vi) Ability to accept, understand and carry out instructions,
- B) Job seeking skills;
- Ability to initiate and schedule own activities,
- ii) Ability to seek employment,
- iii) Completing an application,
- iv) Personal appearance,

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Section 147.325(e)(4)(B) (continued)

- v) Communication and interviewing skills,
- i) Ability to set realistic vocational goals,
- C) Basic Academic skills; and
- D) Alternative vocational placements;
- Supported employment,
- Transitional employment,
- iii) Workshop employment,
- f) The CPP must contain objectives to reach each of the individual's goals in the plan. Each objective:
- Must be developed by the IDT;
- 2) Must be based on the results obtained from the assessment process;
- Must be stated in measurable terms and identify specific performance measures to assess;
- 4) Must be developed with a projected completion or review date (month, day, year); and
- 5) Must be assigned a priority based on the individual's functioning level and on principles of sequential skill development.
- that are developed by the IDT. The individual's needs must be prioritized, and approaches or programs must be developed with specific goals, to address the higher prioritized needs. If there is a lower priority need which is not being addressed through a specific goal or program, a statement must be made as to why it is not being addressed or how the need will be otherwise addressed.
- h) The goals must be designed to assist the individual to function at the greatest physical, cognitive, social and vocational level which he/she can presently or potentially achieve.

NOTICE OF PROPOSED AMENDMENTS

(continued) 147.325 Section

- accomplished in a year's time or so simple that they are already in the individual's repertoire. Goals must not be so difficult that they cannot į,
- For each behavioral and service goal identified in the CPP, the IDT must indicate the appropriate person or persons responsible for implementing the program or providing the service. j
- rehabilitation activities which are available to meet The individual must be offered choices of relevant rehabilitation programs should be encouraged. Community based (off site) their needs. 곷
- Programs designed to implement the objectives in the resident's CPP must specify: 1
- Program goals (long and short term) with rationale for the goals; <u>1</u>
- Specific objectives to meet the individual goals stated sequentially; 5
- frequency, quantity and duration of services; accomplishing the objectives including the Planned service or intervention related to 3
- The evaluation method to be used to monitor provision of the Planned service or intervention; 4
- expected results of accomplishing the objective; The evaluation criteria used to monitor the 2
- Progress evaluation periods; and 9
- οĘ responsible for implementing specific parts Identification of the professional staff the program, and for overall program implementation. 7
- GGP-CPP Implementation. Ê
- A single GCP-CPP must be developed implemented for each individual. 7
- provided Services relevant to the GGP-CPP must be to implement the-GGP CPP. Programs must 5

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NOTICE OF PROPOSED AMENDMENTS

(continued) Section 147.325(m)(2)

that he/she receives a continuous specialized-psychiatric rehabilitation service program across integrated into the individual's daily life so all environments.

- If multiple providers are providing mental health With written consent from the individual, a copy reflect the coordination of goals and services. services to the client, one master CPP shall of the CPP shall be sent to the appropriate providers. 3
- normal, daily occurrences. Specific objectives and services/interventions should be integrated shall be delivered in a natural context during Program interventions to the extent practical into activities which occur naturally in the individual's environment. 4
- Documentation. CPPœ
- toward goals must be documented in progress notes. The individual's response to the CPP and progress 7
- individual's CPP, and assessments that contribute to an overall understanding of his/her ongoing Significant events that are related to the level and quality of functioning, must be documented. 5
- CPP Monitoring and Change. ô

supervised by the Psychiatric Rehabilitation Services Coordinator (PRSC) on an ongoing basis. At least monthly, the PRSC must review and document the Implementation of the individual's CPP must be individual's progress.

- The PRSC must review progress to determine if the individual: 7
- Has successfully completed an objective(s) as identified in the CPP; A A
- Is regressing or losing skills previously qained; a

NOTICE OF PROPOSED AMENDMENTS

Section 147.325(o)(1) (continued)

- Is failing to progress toward identified objectives after reasonable efforts have been made relative to his/her level of functioning and potential; and Û
- accomplishing an objective and is ready made sufficient progress toward move toward a new objective. Has â
- progress towards accomplishing program objectives. must review the progress or lack of 2)
- who is responsible for the individual and with psychiatrist or physician, the PRSC, the nurse revisions in the CPP, when necessary, to the IDT. If revisions are required, the IDT will Based upon this review, the PRSC must suggest make the revisions in consultation with the the individual. 3)
- The QMMP-PRSC coordinates staff in the delivery of programs, oversees data collection, and reviews performance. 4)

GGP-CPP Outcome. (d

The outcome of the current GGP-CPP provides a measure of how well the program of specialized-psychiatric rehabilitation services has moved the individual closer to his/her optimum individual, social, community and vocational functioning.

(Source: Amended at 16 Ill. Reg. effective

Discharge Planning Section 147.340

addresses the reduction of symptoms and the acquisition of behaviors and skills necessary for the Upon admission, a discharge plan must be developed by the interdisciplinary team as a component of the This plan individual to move to the most facilitative individual's comprehensive program plan. environment. е е

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NOTICE OF PROPOSED AMENDMENTS

(continued) Section 147.340

(q

- representative and, when appropriate, the individual's family, both orally and in writing of the upcoming planned discharge. A specific individualized post discharge plan must be developed by the IDT and, when Effective October 1, 1990, thirty (30) days before the individual's planned discharge, the PRSC must notify agencies, family and friends, etc. thirty (30) days before the planned discharge. The plan will identify: appropriate, with input from community support the individual or the individual's legal
- The alternative living site.

7

- Financial resources available. 2)
- Community service needs and availability+1 3
- Community mental health services with scheduled psychiatric appointments+1 4
- Access to medical care and medications+; and 2
- Case management system responsible for transition and follow-up. 9
- the time of discharge, the IDT must: At G
- skills, work and work-related skills and general self-maintenance skills, behavior and impulse control, social functioning, community living health status, as well as indicating specific issues that may negatively impact community adjustment, with recommendations for future Have prepared a discharge summary of the individual's present psychiatric status, programming and follow-up services; and 1
- discharge summary to the individual's new living environment, to assist in his/her successful Provide the post discharge plan of care and adjustment to that environment. 5

Amended at 16 Ill. Reg. effective (Source:

NOTICE OF PROPOSED AMENDMENTS

Section 147.345 Reimbursement for Program Costs in Nursing Facilities Providing Specialized-Psychiatric Rehabilitation Services for Individuals with Mental Illness

Nursing facilities (ICF and SNF) Previding-specialized-providing psychiatric rehabilitation services to individuals, excluding state operated facilities for the mentally ill, will be reimbursed for providing a specialized-psychiatric rehabilitation services Pregram-program for each client with mental illness as specified in Sections 147.300 through 147.340.

a)

- Beginning February 1, 1990, facility reimbursement for cost associated with providing specialized-psychiatric_rehabilitation_services to individuals with mental illness will be made upon conclusion of resident reviews that are conducted by the state's mental health authority or their contracted agent. Facility reimbursement for providing specialized-psychiatric_rehabilitation_services as a result of resident reviews concluded Prior Prior to February 1, 1990, will begin with the facility's February 1990, billing
- c) The additional reimbursement for costs associated with for-specialized-psychiatric rehabilitation services program costs is based upon the presence of three (3) determinants are:

1) Minimum Staffing

- A) Direct Services Facilities must be in compliance with the Health Care Financing Administration's (HCFA) (42 CFR 442.201 or 42 CFR 442.302 (1989)) and the Illinois Department of Public Health's (IDPH) (77 Ill. Adm. Code 300.1230) minimum staffing standards relative to facility type.
- B) The number of additional direct services staff necessary for delivering adequate specialized-psychiatric rehabilitation—services programs for individuals with mental illness is based upon a full time equivalent (FTE) staff to client ratio of 1:7.5.
- 2) Psychiatric Rehabilitation Services Coordinator

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NOTICE OF PROPOSED AMENDMENTS

Section 147.345(c)(2) (continued)

- A) Each individual's specialized-<u>psychiatric</u>
 <u>rehabilitation</u> services program must be
 integrated, coordinated and monitored by a
 Psychiatric Rehabilitation Services
 energianes—<u>Coordinator</u> (PRSC). Any
 facility required to provide specializedpsychiatric rehabilitation services programs
 to individuals with mental illness must
 provide PRSC services. Delivery of these
 services is Sassed upon a full-time
 equivalent (FTE) ratio of one (1) PRSC to
 thirty (30) individuals being served.
- B) Psychiatric Rehabilitation Services
 Coordinator (PRSC) is a person who has at
 least one year of experience working
 directly with persons with mental illness
 and is one of the following:
- i) A doctor of medicine or osteopathy;
- ii) A registered nurse;
- iii) An occupational therapist;
- iv) A psychologist;
- v) A social worker; or
- vi) An individual that has at least a bachelor's degree in a human services field (including, but not limited to, sociology, special education, rehabilitation counseling, and psychology).

3) Assessment and Other Program Services

- A) A comprehensive functional assessment that identifies an individual's needs must be performed as needed to supplement any preliminary evaluations conducted prior to admission to a nursing facility.
- B) A Comprehensive Functional Assessment must include:

NOTICE OF PROPOSED AMENDMENTS

Psychiatric Evaluation completed board certified psychiatrist, or countersigned by a psychiatrist, physician, a Ph.D. clinical psychologist, a Master Degree Section 147.345(c)(3)(B) (continued) j.)

when

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Psycho-social history completed by Social Worker or an Occupational Therapist. ii)

Psychiatric RN, or Licensed Clinical

Social Worker (LCSW).

- Level of functioning scale completed by a Social Worker or an Occupational Therapist. iii)
- ø Rehabilitation potential completed by Social Worker or an Occupational Therapist. iv)
- completed by an Occupational Therapist, Recreation and leisure activities or by the Activity Director. >
- Physical examination completed by a physician or by a registered nurse countersigned by a physician. vi)
- Ø Health assessment completed by registered nurse. vii)
- Services Coordinator or a Social Worker, a Psychiatric Rehabilitation Discharge potential completed and signed by viii)
- qualified professionals, as indicated by the individual's needs, which the IDT's Professional judgment dictates Other assessments, performed by should be performed. ix)
- Costs associated with specialized-Services-psychiatric rehabilitation services program reimbursement includes necessary for the delivery of specialized-psychiatric other program costs, such as consultants, inservice training, program-related supplies and other items q

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NOTICE OF PROPOSED AMENDMENTS

Section 147.345(d) (continued)

rehabilitation services to clients in accordance with their individual program plans.

psychiatric rehabilitation services program reimbursement is dependent upon the facility meeting being served. Facility eligibility for speeialised-Total program reimbursement for the additional cost psychiatric rehabilitation services to individuals with mental illness residing in nursing facilities all criteria specified in Sections 147.300 through will be ten dollars (\$10) per day, per individual associated with the delivery of specializedе е

Amended at 16 Ill. Reg. effective (Source:

Reimbursement for Additional Program Costs Associated With Providing Aetive-Treatment-Section 147.350

Nursing facilities (ICF and SNF) providing aetive-treatment-specialized services to individuals with developmental disabilities, excluding state operated Specialized Services for Individuals with Developmental Disabilities in Nursing Facilities

- facilities for the developmentally disabled, will be reimbursed for providing an-aetive-treatment-a. <u>specialized services</u> program for each client with developmental disabilities as specified in 89 Ill. Adm. Code 144.50 through 144.250. a)
- Beginning February 1, 1990, facility reimbursement for result of resident reviews concluded prior to February providing aetive-treatment-specialized services as a providing astive-treatment-specialized services to individuals with developmental disabilities will be conducted by the state's mental health authority or their contracted agent. Facility reimbursement for made upon conclusion of resident reviews that are 1, 1990, will begin with the facility's February billing cycle. q
- The additional reimbursement for costs associated with adtive-treatment-specialized services programs is based upon the presence of three (3) determinants. The three determinants are:

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NOTICE OF PROPOSED AMENDMENTS

(continued) Section 147.350

Minimum Staffing

- compliance with the Health Care Financing Administration's (HCFA) (42 CFR 442.201 or 42 CFR 442.302 (1989)) and the Illinois Department of Public Health's (IDPH) (77 Ill. Adm. Code 300.1230) minimum staffing Direct Services - Facilities must be in standards relative to facility type. A
- aetive-treatment-specialized services programs for individuals with developmental disabilities is based upon a full time equivalent (FTE) staff to client ratio of The number of additional direct services staff necessary for delivering adequate a
- Qualified Mental Retardation Professional Services 5
- Delivery of these services is based upon a full-time equivalent ratio of one (1) QMRP aetive-treatment-specialized services programs to individuals with developmental (QMRP). Any facility required to provide Qualified Mental Retardation Professional specialized services program must be integrated, coordinated and monitored by disabilities must provide QMRP services. to thirty (30) individuals being served. Each individual's aetive-treatment-A A
- (QMRP) is a person who has at least one year of experience working directly with persons A Qualified Mental Retardation Professional with mental retardation and is one of the following: B)
- A doctor of medicine or osteopathy; į.
- A registered nurse;
- Occupational Therapist; Occupational Therapy Assistant, Physical Therapist, An individual who holds at least a following professional categories: bachelor's degree in one of the iii)

DEPARTMENT OF PUBLIC AID

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NOTICE OF PROPOSED AMENDMENTS

Section 147.350(c)(2)(B) (continued)

to Worker; Speech-Language Pathologist or Audioligist; Recreation Specialist; Psychologist, Master's Degree; Social Services, including but not limited Sociology, Special Education, Rehabilitation Counseling, and Psychology (42 CFR 483.430(1989)). Registered Dietitian; and Human Physical Therapy Assistant,

- Assessment and Other Program Services 3
- preliminary evaluations conducted prior to identifies an individual's needs must be A comprehensive functional assessment performed as needed to supplement any admission to a nursing facility. æ
- A Comprehensive Assessment must include: B
- "physical development and health;
- assessment of oral hygiene practices; dental examination that includes an ii)
- iii) nutritional status;
- sensorimotor development/auditory functioning; iv)
- social development; **^**
- speech and language development; vi)
- the assessment instruments that must be Client and Agency Planning (ICAP) are individual to be able to function in the community (Scales of Independent Behavior (SIB) or the Inventory for adaptive behaviors or independent living skills necessary for the used for this assessment); vii)
- viii) vocational or educational skills (if applicable);
- cognitive development; ix)

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NOTICE OF PROPOSED AMENDMENTS

(continued) Section 147.350(c)(3)(B)

- medication and immunization history ×
- of years) that includes an assessment psychological evaluation (within the individual's emotional and intellectual status; xi)
- capabilities and preferences relative to recreation/leisure activities; xii)
- and occupational therapy assessments; individual's needs, such as physical other assessments indicated by the xiii)
- applicable) with information regarding seizure disorder history (if frequency of occurrence and classification; and xiv)
- vision, auditory and speech/language. screenings (the facility performs or obtains) in the areas of nutrition, XV)
- <u>services</u> programs reimbursement includes other program costs such as consultants, inservice training, and Costs associated with agtive-Treatment-specialized other items necessary for the delivery of aetive-treatment-specialized services to clients in accordance with their individual program plans. q
- specialized services to individuals with developmental disabilities residing in nursing facilities will be ten dollars (\$10) per day, per individual being served. Facility eligibility for aetive-treatmentdependent upon the facility meeting all criteria specified in Sections 147.5 through 147.205, 147.350 and 144.25 through 144.250. Total program reimbursement for the additional costs associated with the delivery of agtive-treatmentspecialized services program reimbursement is е е

Amended at 16 Ill. Reg.

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DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

- The Heading of the Part: RELATED PROGRAM PROVISIONS 7
- Code Citation: 89 Ill. Adm. Code 117 5
- Proposed Action: Section Number: <u>e</u>
- Section 12-13 of the Illinois Public Statutory Authority: Section 12-13 of the Illinois Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 12-13) Amendment 4)
- serving as a protective payee. In some cases a recipient is suited to serve as a protective payee. This change further aligns the rules with Federal regulations by Involved: This rulemaking eliminates the prohibition against a recipient of categorical or General Assistance requiring a review of the protective payment plan every A Complete Description of the Subjects and Issues. Involved: This rulemaking eliminates the prohibition 2
- Will these Proposed Amendments replace Emergency Amendments å currently in effect? 9
- õ Does this rulemaking contain an automatic repeal date? 2
- Do these Proposed Amendments contain incorporations by reference? 8
- Are there any other Proposed Amendments pending on this Part? 6
- This rulemaking Statement of Statewide Policy Objectives: has no effect on local governmental units. 10)
- in writing and should be addressed to Judy Umunna, Bureau of Rules and Regulations, Illinois Department of Public Aid, Jesse B. Harris Building II, 100 South Grand Avenue East, 3rd floor, Springfield, Illinois 62762 (217) 524-3215. The Department will consider all written comments it receives within 30 days of the date of concerning the proposed rulemaking. All comments must be Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Any interested parties may submit comments, data, views, or arguments publication of this notice. 11)

12) Initial Regulatory Flexibility Analysis:

NOTICE OF PROPOSED AMENDMENTS

- Commerce and Community Affairs: Not applicable Date Proposed Amendments were submitted to the Business Assistance Office of the Department of æ
- Types of small businesses affected: None B)
- Reporting, bookkeeping or other procedures required for compliance: None _υ
- Types of professional skills necessary for compliance: None â

The full text of the Proposed Amendments begins on the next

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DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

TITLE 89: SOCIAL SERVICES HAPTER 1: DEPARTMENT OF PUBLIC AID SUBCHAPTER b: ASSISTANCE PROGRAMS CHAPTER I:

RELATED PROGRAM PROVISIONS PART 117

Incorporation By Reference Payee For Financial Assistance	Replacement of Missing Warrants Withholding of Rent (Repealed) Recovery of Interim Assistance - Aid to the Aged, Blind or Disabled and General Assistance	Funerals and Burials Funeral Home Services	Payment to Vendor(s) Claims for Reimbursement Submittal of Claims	Substitute Parental Care/Supplemental Child Care - AFDC, AABD and GA Family Cases Charge for Replacement of Photo ID Cards (Repealed	Direct Deposit of Recipients' Warrants State Income Tax Match
Section 117.10	117.20 117.30 117.40	117.50	117.53	117.60	117.80

AUTHORITY: Implementing Articles III, IV and VI and authorized by Section 12-13 of the Illinois Public Aid Code (Ill. Rev. Stat. 1987-1991, ch. 23, pars. 3-1 et seq., 4-1 et seq., 6-1 et seq. and 12-13)+ SOURCE: Filed and effective December 30, 1977; amended at 2 111. Reg. 31, p. 68, effective August 3, 1978; amended at 3 111. Reg. 38, p. 258, effective Spetember 20, 1979; amended at 3 111. Reg. 5195; amended at 7 111. Reg. 16111, effective November 22, 1983; amended at 7 111. Reg. 16111, effective March 13, 1985; amended at 9 111. Reg. 8733, effective March 20, 1985; amended at 9 111. Reg. 8733, effective March 20, 1985; amended at 9 111. Reg. 10779, effective July 5, 1985; amended at 9 111. Reg. 10779, effective July 5, 1985; amended at 111. Reg. 16914, effective October 16, 1985; amended at 111. Reg. 1686; effective August 15, 1988; amended at 12 111. Reg. 13608, effective August 15, 1988; amended at 12 111. Reg. 13608, effective August 15, 1988; amended at 13 111. Reg. 14296, effective August 15, 1988; amended at 13 111. Reg. 1860, effective August 15, 1988; amended at 13 111. Reg. 1860, effective August 15, 1988; amended at 13 111. Reg. 780, effective January 1, 1990; amended at 14 111. Reg. 9488,

NOTICE OF PROPOSED AMENDMENTS

effective June 1, 1990; amended at 15 Ill. Reg. 13533, effective August 29, 1991; amended at 16 Ill. Reg. effective

CAPITALIZATION DENOTES STATUTORY LANGUAGE NOTE:

Payee For Financial Assistance Section 117.10

- The assistance grant shall be paid to an individual designated as the payee. a)
- designated as the payee with the following exceptions receiving assistance shall be The individual q
- t 0 arrangements are made with the Department by the When a client has a judicially appointed conservator or guardian, payment shall be the conservator or guardian unless other conservator or guardian. 1
- available to act as payee, another person may act as Temporary Grantee for a period not to exceed situation where no specified relative is æ In 5
- protective payment plan (PPP) is initiated by the Department when a client has demonstrated mismanagement of funds to the detriment of the welfare of the client or family: Ø 3
- a utility company and the Department in the client's behalf. In this instance, when the payment, payment on current and back utility charges only shall be paid by the payee; the balance of the payment shall be forwarded to A client defaults on an agreement made with protective payee receives the assistance the client each month. F
- For AFDC only When a child in the assistance unit is determined to be neglected by the Department of Children and B. Abused and Neglected Child Reporting Act (Ill. Rev. Stat. 1985-1991, ch. 23, par. 2053) and 89 Ill. Adm. Code 300.APPENDIX Family Services under Section 3 of the B)

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DEPARTMENT OF PUBLIC AID

NOTICE OF PROPOSED AMENDMENTS

- Payee For Financial Assistance (Cont'd) Section 117.10
- been found guilty of public assistance fraud under Article VIII A of the Illinois Public Aid Code (Ill. Rev. Stat. 1985-1991, ch. 23, For AFDC only - The case involves a record establishing that a parent or relative has pars. 8A-1 et seq.). ပ
- considered as evidence of grant management. Nonpayment of rent for two months shall be Q Q
- Notice shall be sent to the client before a protective payment plan is initiated. ๋
- and must agree to assume responsibility for the expenditure of the assistance payment in behalf of the The protective payee shall not receive compensation ĝ
- The client's landlord, or a vendor of goods or services to the client er-a-Gurrent-recipient-ef-eategerieal-or-General-Assistance-shall not be designated a protective payee. е е
- social The Department may designate private welfare or service agencies to serve as protective payees. £)
- as act Department may appoint a member of its staff to protective payee. However, the staff acting as When no other suitable payee is available, the protective payee may not be: g
- a person determining the client's eligibility or level of assistance; 7
- person handling fiscal processing relating to the recipient; æ 5
- investigative staff; or 3
- a local office administrator. 4)
- plan þe need for continuation of a protective payment the performance of the protective payee shall and ੰ

NOTICE OF PROPOSED AMENDMENTS

Payee For Financial Assistance (Cont'd) Section 117.10

reviewed and evaluated by the Department as often as circumstances indicate, or, for AFDC cases at least every three-12 months.

_, effective (Source: Amended at 16 Ill. Reg.

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED RULES

- The Heading of the Part: Americans With Disabilities Act Grievance =
- 4 Ill. Adm. Code 450 Code Citation: 5

5) Section Number: 450.10 450.30 450.40 450.50 450.40	Adopted Action: New New New New New
450.70	New New

- Statutory Authority: Implementing and authorized by Section 16 of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, par. 4
- Effective Date of Rules: May 29, 1992 2
- Does this rulemaking contain an automatic repeal date? No. 6
- Does the Rule contain incorporations by reference? ~
- May 29, 1992 Date Filed in Agency's Principal Office: 8
- Notice of Proposal Published in Illinois Register: 6

February 14, 1992, 16 Ill. Reg. 2292

- 10) Has JCAR issued a Statement of Objections to the Rule?
- 11) Differences between proposal and final version

Section 450.10. Heading changed from "Purposes" to "Purpose"

Section 450.20(c). The address for designated coordinator was added. Several minor!editing changes were made.

- made as 12) Have all the changes agreed upon by the agency and JCAR been Indicated in the agreement letter issued by JCAR? Yes.
- Š 13) Will the Rule replace an emergency rule currently in effect?
- 14) Are there any amendments pending on this Part?

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED RULES

15) Summary and Purpose of Rule:

The purpose of this rulemaking is to publish a grievance procedure which is being adopted by the Department pursuant to the provisions of the Americans With Disabilities Act. Information and questions regarding these adopted rules shall be directed (9

720 Stratton Office Building Springfield, IL 62706 Stephen W. Seiple (217) 782-9669 The full text of the Adopted Rules begins on the next page.

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED RULES

CHAPTER XV: DEPARTMENT OF CENTRAL MANAGEMENT SERVICES TITLE 4: DISCRIMINATION PROCEDURES

AMERICANS WITH DISABILITIES ACT GRIEVANCE PROCEDURE PART 450

Definitions 450.10

Procedure

Designated Coordinator Level

Accessibility Final Level 450.30 450.40 450.50 450.60

Case-by-case Resolution

AUTHORITY: Implementing and authorized by Section 16 of the Civil Administrative Code of Illinois (Ill. Rev. Stat. 1991, ch. 127, par. 16)

. effective May 29, 1992 SOURCE: Adopted at 16 Ill. Reg. 894年

Section 450.10 Purpose

- (Procedure) is established pursuant to the Americans With Disabilities Act of 1990 (42 USC Section 12101 et seq.) and specifically Section 35.107 of the Title II regulations, 28 CFR Part 35, requiring that a grievance procedure be established to resolve grievances asserted by qualified individuals with disabilities. Should any individual desire to review the ADA or its regulations to understand the rights, privileges and remedies afforded by it, please contact the Designated Coordinator. This Americans With Disabilities Act (ADA) Grievance Procedure æ
- In general, the ADA requires that each program, service and activity offered by the Department, when viewed in its entirety, be readily accessible to and usable by qualified individuals with disabilities.
- with all individuals requesting readily accessible programs, services and activities. The Department encourages supervisors of programs, It is the intention of the Department to foster open communication services and activities to respond to requests for modifications before they become grievances. Û

Definitions Section 450.20

Grievance e

A grievance is any complaint under the ADA by an individual with a disability who:

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED RULES

- in or receipt of the benefits of a program, activity or service meets the essential eligibility requirements for participation offered by the Department, and _
- believes he or she has been excluded from participation in, or denied the benefits of any program, service or activity of the Department or has been subject to discrimination by the Department. 5
- Complainant 9

Grievance Form provided by the Department under this procedure. A complainant is an individual with a disability who files a

Designated Coordinator ()

responsibilities under Title II of the ADA including investigation of grievances filed by complainants. The Designated Coordinator can be contacted at ADA Coordinator, Department of Central Management Services, 521 Stratton Building, Springfield, Illinois, 62706. (See Department Director who is/are responsible for the coordination of efforts of the Department to comply with and carry out its The Designated Coordinator is the person(s) appointed by the 28 CFR 35.107)

Section 450.30 Procedure

- be extended by mutual agreement in writing by the complainant and the form and manner as described within the specified time limits. It is mutually desirable and beneficial that grievances be satisfactorily resolved in a prompt manner. Time limits established in this procedure are in calendar days, unless otherwise stated, and Grievances must be submitted through the channels defined below in the reviewer at the Designated Coordinator and Final Levels. (e
- A complainant's failure to submit a grievance, or to submit or appeal it to the next level of procedure within the specified time limits, shall mean that the complainant has withdrawn the grievance or has accepted the last response given in the grievance procedure as the Department's last response. Q
- The Department shall, upon being informed of that individual's desire to file a formal grievance, instruct the individual how to receive a copy of this Procedure and the Grievance Form. c)

Section 450.40 Designated Coordinator Level

If an individual desires to file a formal written grievance, the individual shall promptly, but no later than 180 days after the е (е

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DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED RULES

Coordinator in writing on the Grievance Form prescribed for that purpose. The Grievance Form must be completed in full in order to alleged discrimination, submit the grievance to the Designated receive proper consideration by the Designated Coordinator.

- Upon request, assistance shall be provided by the Department to complete the Grievance Form. 9
- The Designated Coordinator, or his/her representative, shall investigate the grievance and shall make reasonable efforts to resolve it. The Designated Coordinator shall provide a written response to the complainant and Director within ten (10) business days after receipt of the Grievance Form. ()

450.50 Final Level Section

- within five (5) business days after receipt by the complainant of the If the grievance has not been resolved at the Designated Coordinator dissatisfaction with the Designated Coordinator's written response, complainant shall submit these documents to the Director, together Level to the satisfaction of the complainant, the complainant may submit a copy of the Grievance Form and Designated Coordinator's response to the Director of the Department for final review. The with a short written statement explaining the reason(s) for Designated Coordinator's response. (e
- The Director shall appoint a 3-member panel to review the grievance at the Final Level. One member so appointed shall be designated chairman. 9
- The complainant shall be afforded an opportunity to appear before the panel. Complainant shall have a right to appoint a representative to appear on his/her behalf. The panel shall review the Designated Coordinator's written response and may conduct interviews and seek advice as it deems appropriate. <u>်</u>
- recommendations and shall bear the signatures of the concurring panel Upon reaching a concurrence, the panel shall make recommendations in members. A dissenting member of the panel may make a recommendation to the Director in writing and shall also sign such recommendation. grievance. All recommendations shall include reasons for such writing to the Director as to the proper resolution of the ê
- approve, disapprove or modify the Panel recommendations, shall render Director's decision shall be final. If the Director disapproves or modifies the Panel recommendations, the Director shall include a decision thereon in writing, shall state the basis therefor, and shall cause a copy of the decision to be served on the parties. Th Upon receipt of recommendations from a panel, the Director shall e)

DEPARTMENT OF CENTRAL MANAGEMENT SERVICES

NOTICE OF ADOPTED RULES

written reasons for such disapproval or modification.

accordance with the State Records Act (III. Rev. Stat. 1991, ch. 116, par. 43.3 et seq.) or as otherwise required by law. statement of reasons for dissatisfaction, the recommendations of the panel and the decision of the Director shall be maintained in The Grievance Form, the Designated Coordinator's response, the (J

Section 450.60 Accessibility

The Department shall ensure that all stages of the Procedure are readily accessible to and usable by individuals with disabilities.

Section 450.70 Case-by-case Resolution

Each grievance involves a unique set of factors which include but are not limited to: the specific nature of the disability; the essential eligibility requirements, the benefit to be derived, and the nature of the service, program or activity at issue; the health and safety of others; and, whether or not an accommodation would constitute a fundamental alteration to the program, service or activity or undue hardship on the Department. Accordingly, termination of a grievance at any Level, whether through the granting of relief or otherwise, shall not constitute a precedent on which any other complainants should rely.

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DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF ADOPTED AMENDMENTS

- The Heading of the Part: Licensing Standards for Group Day Care Homes 7
- Code Citation: 89 Ill. Adm. Code 408

5

Adopted Action Section Numbers 3

Amend	New Section	Amend									
408.5	408.7	408.20	408.30	408.35	408.40	408.50	408.55	408.60	408.65	408.70	408.105

- of 1969 (III. Rev. Stat. 1991, ch. 23, pars. 2211 et seq.), Section 3 of the Abused and Neglected Child Reporting Act (III. Rev. Stat. 1991, ch. 23, par. 2053), and Sections 821 and 822 of the Facilities Requiring Smoke Detectors Act (III. Rev. Stat. 1991, ch. 127½, par. 821 and 822) Statutory Authority: Implementing and authorized by the Child Care Act 4
- Effective Date of: May 30,1992 2
- Section 408.65 contains an automatic repeal X Yes Does this rulemaking contain an automatic repeal date: If so, please specify date: date of March 31, 1994. 9
- Š Do these amendments contain incorporations by reference? 2
- Date Filed in Agency's Principal Office: May 30, 1992 8
- Notice(s) of Proposal Published in Illinois Register: October 18, 1991 , 15 Ill. Reg. 14764 6

(issue date)

õ Has JCAR issued a Statement of Objections to this (these) rule(s)? 10

NOTICE OF ADOPTED AMENDMENTS

Difference(s) between proposal and final version: 11)

Section 408.5, Definitions

The definition of "Approved smoke detector" was modified to include a reference to the applicable section of the Illinois Revised Statutes.

The definition of "Group day care home" was modified to clarify that foster children are included in the number of children counted. The definition of "School age" was modified to include five year olds who are in full-day kindergarten.

term applies to those areas of the home that will not be included in the The definition of "Special use areas" was modified to specify that this measurement of the area used for child care.

The definitions of "Infant" and "Toddler" were removed.

Definitions were added for "Grade level", "Ground level", and "Primary basement exit."

Section 408.7, Effective Date of Standards

This Section was not included in the proposed rulemaking. It was added in response to provider concerns that the amended standards would become effective immediately and that providers would not be given sufficient licensed under this Part six months to come into compliance with the new new Section was added to permit group day care homes which are already time to come into compliance with the new or amended standards. This or amended standards. Group day care homes which are not licensed at the time these rules are officially adopted and published must comply with the new or amended rule sections before a license is issued.

Section 408.20, Provisions Pertaining to the License

Section 408.65, Number and Ages of Children Served, which was revised in response to public comments. If changes had not been made in this Section, the rule would have been internally inconsistent and confusing. were added to make this Section consistent with language changes in This Section was not included in the proposed rulemaking.

Subsections (c) and (d) were modified to recognize that at times the licensee could exceed the capacity and age limits specified on the license when accepting a school-age child for care due to a brief, unforeseen school closing or when accepting a sibling group in accordance with a transition plan approved by the Department.

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NOTICE OF ADOPTED AMENDMENTS

Section 408.30, General Requirements for Group Day Care Homes

Item (a) (2) - The requirement for a fire extinguisher was retained and the classes of acceptable fire extinguishers listed. Item (a) (4) - The definition of "substantial remodeling" (as it relates electrical system) was revised to read: Substantial remodeling means to the requirement for smoke detectors wired directly into the house more than 15% of the replacement cost of the group day care home Items (a) (5) and (6) were revised to require approval from a building inspector or local fire authority for the use of a portable space heater when day care children are present.

caregiver may seek clearance from the local fire inspector or the Office of the State Fire Marshal. If the fire authority certifies the basement is safe to provide day care services to the ages and number of children for whom care is intended, the Department will accept the certification child care, it must have at least two exits, one of which must qualify as a primary basement exit as defined in Section 408.20. If the home does not have an exit which qualifies as a primary basement exit, the Item (a) (9) was modified to require that when a basement is used for in lieu of the primary basement exit.

Section 408.35, General Requirements for Group Day Care Home Family

care. It was not the Department's intent to require providers to remain care home caregivers to remain awake all night when providing night-time to clarify that caregivers who receive children for night-time care may sleep while children are present if 1) the caregiver and the children sleep in the same area of the home, and 2) the children's bedrooms and awake all night when providing night-time care when children are cared for in a family-like environment. Therefore, subsection (k) was added comments were received stating that Department rules require group day the caregiver's bedrooms are within hearing distance of each other. This Section was not included in the proposed rulemaking. Public

Section 408.40, Background Checks

group day care homes, comprehensive amendments were proposed for day care homes. A serious omission was identified during the public comment period: Persons who come into regular contact with children cared for in the day care or group day care home who are not employed as a child care assistant or substitute or who do not reside in the home were not included in the requirements for a background check. Although this Section was not included in the proposed rulemaking for

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DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF ADOPTED AMENDMENTS

individuals who come into regular or frequent contact with children cared for in the day care home must pass the background check, even if they are not the licensed caregiver or an employee of the group day care Subsection (a) was amended in both sets of rules to clarify that

Section 408.50, Child Care Assistants

separated its requirements for assistants into two categories: part-time compatible with the realities of the current job market. The Department expressed that it would not be possible to find part-time, after school This Section was not included in the proposed rulemaking for group day care homes. However, considerable public comment was received on the age requirements for child care assistants. A particular concern was assistants unless the qualifications for assistants were made more and full-time assistants.

Full-time assistants must be at least 18 years of age. These amendments also require that assistants under age 18 must be under the direct, Part-time assistants must be at least 14 years of age and at least five personal supervision of the caregiver at all times. Direct, personal supervision was defined as within visual or audible contact of the years older than the oldest child supervised by the assistant.

Section 408.55, Substitutes

care homes. Nonetheless, extensive comments were received that the limitations on substitutes wee too restrictive. The Department modified subsection (a) to allow a substitute to be used up to twenty-five child continuing education when the substitute to be used during these periods weeks in a twelve month period. In addition, the supervising agency may changes were made in response to public comments and to make the group day care home rules consistent with the day care home rules. This Section was not included in the proposed rulemaking for group day meets the qualifications for a group day care home caregiver. These approve additional time for family emergencies, medical reasons, and care hours per month and for an additional period not to exceed two

Section 408.60, Admission and Discharge Procedures

care homes. Nonetheless, comments were received that the limitation of day care services to not more than 12 hours per day resulted in children giver would not exceed the 12 hour rule. Subsection (a) was modified to needlessly being moved from one day care setting to another so the care-This Section was not included in the proposed rulemaking for group day allow children to remain in day care more than 12 hours per day if the parent's work schedule requires it.

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

NOTICE OF ADOPTED AMENDMENTS

Section 408.65, Number and Ages of Children Served

children may be under 24 months of age; or the caregiver alone may care for up to eight preschool children if no child is under age three; or Subsection (e) was relettered to (d) and modified to match the requirements for a single caregiver in a day care home. These requirements allow a caregiver alone to care for a mixed age group consisting of up children may be under five years of age, of which no more than three the caregiver alone may care for up to twelve school age children as to eight children under twelve years of age, of which up to five defined in Section 408.5. New subsection (f) was added to allow group day care homes to accept one closing, as long as the total number of children in the home does not additional school-age child in the event of an unforeseen school exceed the maximum number of 16 children.

to the Department explaining how the home will come back into compliance established age groupings. The caregiver must submit a transition plan full compliance with all the licensing standards to accept siblings of children already receiving care in the home who do not fit into the New subsection (g) was added to allow group day care homes who are in with the age group requirements within six months of approval of the plan. The Department must approve the plan prior to its enactment.

propose additional amendments, as indicated, no later than July 1, 1993. March 31, 1994, to this Section of the rules. Subsection (i) further requires the Department to review the impact of these amendments and New subsection (i) was added to insert an automatic repeal date of

Section 408.105, Children Under 30 Months of Age (formerly titled "Infants and Toddlers")

"infants" and "toddlers" were deleted throughout and replaced with the terms "children under 15 months of age" and "children under 30 months of age" respectively in order to make these rule sections consistent with This Section was not included in the proposed amendments. The terms Part 406, Licensing Standards for Day Care Homes

Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? 12)

Will these amendments replace an emergency rule currently in effect? 13)

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Are there any amendments pending on this Part? 14)

- to add more flexibility to the licensing standards, and to ensure that the health and safety of children receiving licensed day care services amendments is to prescribe the criteria for implementing the increase Summary and Purpose of these amendments: These adopted amendments implement Public Act 87-0675 which increased the total capacity of a group day care home from 12 to 16 children. The purpose of these was protected. 15)
- Information and questions regarding these amendments shall be directed :: |t 16)

Jacqueline Nottingham, Chief Name: Office of Rules and Procedures Address

Department of Children and Family Services 406 East Monroe

62701-1498 Springfield, Illinois

217/524-1983 Telephone: The full text of the adopted these amendments begins on the next page:

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CHAPTER III: DEPARTMENT OF CHILDREN AND FAMILY SERVICES SUBCHAPTER e: REQUIREMENTS FOR LICENSURE SOCIAL SERVICES TITLE 89:

PART 408

LICENSING STANDARDS FOR GROUP DAY CARE HOMES

AUTHORITY: Implementing and authorized by the Child Care Act of 1969 (111. Rev. Stat. 1991, ch. 23, pars. 2211 et seq.), Section 3 of the Abused and Neglected Child Reporting Act (111. Rev. Stat. 1991, ch. 23, par. 2053), and Sections 821 and 822 of the Facilities Requiring Smoke Detectors Act (111). Rev. Stat. 1991, ch. 127 1/2, pars. 821 and 822).

Programs

Adopted at 13 111. Reg. 14828, effective October 1, 1989; emergency SOURCE:

Section 408.5 Definitions

ccredited by the North Central Association of its regional counterparts, or the National "Accredited" means accredited by Schools and Colleges, Accreditation Council. "Adult," as used in this Part, means a person eighteen (18) years of age or older.

the State Section 2 of the Facilities Requiring Smoke Detectors "Approved smoke detector" or "detector" means a smoke detector of photoelectric type which complies with all requirements of the Rules and regulations of the Office of Act (111. Rev. Stat. 1991, ch. 127 1/2, par. 802). OF Fire Marshal. ionization

12 of "Attendance" means the total number of children under the age present at any one time. Department" means the licensing representative or any person acting on behalf of the Director of the "Authorized representative of the

"Caregiver" means the individual directly responsible for child care.

#ehiid #-means-any-person-under-i0-years-of-age-

operator of the facility, apart from the Child care facilities may be established for profit or not-for-profit. "Child care facility" is further defined in Section 2.05 in The Child association, or organization, which arranges for care or cares for parents in any facility as defined in the Child Care Act of 1969. facility" means any person, group of persons, agency, children unrelated to the Care Act of 1969. care

of clinical "Children with special needs" means child(ren) exhibit one or more which is confirmed by following characteristics evaluation:

her potential without special services "Visual impairment": the child's visual impairment is such or to his cannot be achieved. development

to develop language, thus causing extreme deprivation in learning

sufficient to enable him or her to understand the spoken word and

s

child's residual hearing

impairment": the

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communication, or a hearing loss is exhibited which prevents spoken language, limiting normal language acquisition and learning. environmental sounds and full awareness of

physical health impairment": the child exhibits a physical or health impairment which requires adaptation of the or "Physical

child exhibits deviations of speech and/or language processes which are outside the range of acceptable variation within a given environment and impairment": the which prevent full social development. and/or language

"Learning disability": the child exhibits one or more deficits in the essential processes of perception, conceptualization, language, memory, attention, impulse control or motor function. an effective significantly an disability and/or maladaptive behavior which interferes with learning and/or social functioning. "Behavioral disability": the child exhibits

development, mental capacity, and/or adaptive behavior are markedly delayed. Such mental impairment may be mild, moderate, severe or profound. intellectual child's "Mental impairment": the

"Department" means the Illinois Department of Children and

"Discipline" means the process of helping child(ren) to develop inner in socially controls so that they can manage their own behavior acceptable ways. "Grade level" means not more than four feet above or four feet below ground level.

"Ground level" means that a child can step directly from the exit onto the ground, a sidewalk, a patio, or any other surface which is above or below the ground. "Group day care home" means a family home which receives more than 3 up to ± 2 $\underline{16}$ children for less than 24 hours per day. The number counted includes the family's natural, foster, or adopted children and all other persons under the age of 12.

"Guardian" means the guardian of the person of a minor.

"Infant;"--as--used-in-this-Part;-means-a-child-between-6-weeks-and-l5 months-of-age-

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"License" means a document issued by the Department of Children and Family Services which authorizes child care facilities to operate in accordance with applicable standards and the provisions of the Child Care Act of 1969.

collection and review of supporting documents to determine compliance with The Child Care Act of 1969 and the standards prescribed by this review of an application for license, on-site visit(s), interviews, and "License study," as used in this Part, means the

capacity" means the maximum number of day care children Children age 12 and over on the premises are not considered in under age 12 permitted in the group day care home at any one time. determining license capacity. "Licensed

"Licensing representative" for the purposes of this Part, means those Department staff or other persons authorized under Section 5 of The Child Care Act of 1969 to examine facilities for licensure. "Parent(s)," as used in this Part, means those person(s) assuming legal responsibility for care and protection of the child on a 24-hour basis; includes guardian or legal custodian. "Permit," as used in this Part, means a one-time only document issued by the Department of Children and Family Services for a six-month period to allow the individual(s) to become eligible for a license. "Physician" means a person licensed to practice medicine in the State of Illinois. "Premises" means the location of the group day care home wherein the resides and includes the attached yard, garage, and any other outbuildings.

"Primary basement exit" means the preferred method of egress from

basement in an emergency. The primary means of exit may be:
A door that exits directly to the outside at grade level and which has no more than twelve interior steps leading to the door. A window that exits directly to the outside at ground level, which is operable from the inside without the use of tools, large enough to accommodate an adult, and which has not more than five interior steps leading to the window. "Program" means all activities provided for the child(ren) during their hours of attendance in the home. "Related" means any of the following relationships by blood, marriage, or adoption: parent, grandparent, great-grandparent, great-uncle,

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stepparent, stepbrother, stepsister, uncle, aunt, nephew, niece, or first cousin. great-aunt, brother, sister,

workers, speech therapists, physical and occupational therapists, educators and other technical and professional persons whose expertise is utilized in providing specialized services to child(ren) with "Resource personnel" means physicians, nurses, psychologists, social

"School age" means child(ren) six (6) to twelve years of age or -- otder and five year olds who are in full-day kindergarten. "Special use areas" means areas of the home which may not be included in the measurement of the area used for child care. Special use areas include, but are not limited to, laundry rooms, furnace rooms, bathrooms, hazardous areas, and areas off-limits to children.

for purposes of this Part, means any natural or artificial basin of water intended for public swimming or recreational includes bathing beaches and pools at private residences when used for bathing which exceeds two feet six inches (2'6") in depth. children enrolled in a child care facility. "Swimming pool,"

mgoddłeru--means--a--chiłd-from-t5-months-to-2-years-of-age---The-term may-include-child(ren)-up-to-30-months-of-age-depending-upon--physical or-social-development:

depth which is intended for recreational bathing, water play or similar activity. The term includes recessed areas less than two feet six inches in depth in swimming pools which are designated primarily purposes of this Part, means any natural or (5'6") "Wading pool," for purposes of this Part, means any artificial basin of water less than two feet six inches

8950 Reg. 111. 16 at May 30, 1992 (Source: Amended

Section 408.7 Effective Date of Standards

are officially adopted and published and shall apply immediately to all group day care homes which are not currently licensed. Group day care homes licensed <u>The standards prescribed in this Part shall become effective upon the date they</u> at the time these rules are officially adopted and published shall have months from the date to comply with the new or revised standards

effective 111. 16 May 30, 1992 (Source: Added

Section 408.20 Provisions Pertaining to the License

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- Further, the licensee(s) shall be The licensee(s) shall be a primary caregiver or caregivers who the requirements of this Part. Further, the licensee(s) either an individual or a man and woman married to each other. a)
- A group day care home license is valid for 2 years unless revoked by the Department or voluntarily surrendered by the licensee. q
- The number of children cared for in the group day care home at any one shall not exceed the license capacity. However, the caregiver may accept one additional school-age child in accordance with Section 408.65(£), as long as the total number of children in the home under age 12 does not exceed 16 children. t i me ô
- accordance with Section 408.65(g) in order to keep members of a transition plan to the Department The age limits specified on the license shall be observed, unless sibling group together and the Department has approved the plan. submitted has licensee q
 - Child care may be provided only in those areas specified on the license. (e
- The license is valid only for the family residence of the licensee and shall not be transferred to another person. (j
- The license shall not be valid for a name or an address other than the name and address on the license. 6
 - The license shall be prominently displayed in the home.
 - There shall be no fee or charge for the license. 2

effective 8950 Reg. 111. 16 at May 30, 1992 (Source: Amended

Section 408.30 General Requirements for Group Day Care Homes

- The physical facilities of the home, both indoors and outdoors, shall meet the following requirements for safety to child(ren). a)
- sterile gauze pads, adhesive tape, tweezers, first aid cream and The home shall have a first aid kit consisting of band-aids, mild soap. _
- The kitchen shall be equipped with an operable fire extinguisher rated #A:20BC-by-a-national-testing-laboratory; for Class C fires. and 5)
- Electrical outlets that are within reach of child(ren) under five of age shall have protective coverings. There shall be no exposed or uninsulated wiring. years 3)
- The home shall be equipped with a minimum of one approved smoke shall be installed on the ceiling and at least 6 inches from any or on a wall located between 4 and 6 inches from the detector on every floor level, including an attic and basement. A smoke detector in operating condition shall be within fifteen (15) feet of rooms where child(ren) nap or sleep. The detector ceiling. Further, in any facility constructed after December 31, 1987, or which undergoes substantial remodeling of its structure or wiring system after that date, the smoke detector(s) shall be and, permanently wired into the structure's AC power line, 4)

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interior -- walls -- or -- ceiling(s); -- or -- rewiring more than fifteen shall be wired so that the activation of one detector will activate all the detectors in the facility (Section 2 of "AN-AGG to-reguire-the-instailation-and-maintenance-of-smoke-detectors-in (Ill. Rev. Stat. 1987 1991, ch. 127 1/2, par. 822). For purposes more than one detector is required to be installed, the detectors certain-facilities the Facilities Requiring Smoke Detectors Act of this rule, "substantial remodeling" includes--but--is-not kimited-to-any-addition-which represents more-than-ten-percent-of the-square-footage-of-the-group-day--care--home;--repiacement--of ercent of the replacement cost of the group day care home.

- Fixed sSpace heaters, fireplaces, radiators, and other heating sources in areas occupied by children shall be separated by partitions or a sturdy barrier to prevent contact. 2)
- installed or in which a portable space heater is being utilized shall furnish a written statement from a building inspector, ventilating contractor, local fire inspector or the Office of the State Fire Marshal, certifying its safety upon installation. In addition, the Department shall require such a certification of safety for any heating installation, appliance been A facility in which a wood-burning stove or fireplace has or device it has reason to believe to be unsafe. heating and 9
- In one and two-family dwellings, infants-and-toddiers children on the second floor or below. In other residential buildings, infants and-toddlers children under 30 months of age shall be housed and Office of the State Fire Marshal or local fire inspector states, in writing, that the combination of remote exits, fire detection, fire suppression, and/or automatic sprinkler system render the residence safe for under 30 months of age shall be housed and cared for cared for only in areas which the the care of infants and toddlers. 7
- No area accessible only by a ladder or folding stairs or through a trap door shall be used for sleeping or napping. 8
- Where When the basement area may be utilized used for child care, qualify as a primary basement exit. directly-to--the--outside--at grade-level---An-outside-window-operable-from-the-inside-(without the--use--of--toots}-and-providing-an-unobstructed-opening-of-not less-than-5-7-square-feet-in-area;-may-be-used-as-a--second--exit provided--it--is--not--more--than--44-inches-above-the-fioor---in addition;-the-opening-shall-be-at-least-20-inches-in-width;--with a--corresponding--height--to--give--5.7-square-feet:--The-opening shall-be-at-least-24-inches-in-height-with-a-corresponding--width to--give--5-7--square--feet. If no basement exit qualifies as a the basement, the exits, and any fire suppression or fire alarm devices. If the local inspector or State Fire Marshal certifies hat the basement is safe for the number and ages of children who at-teast two exits shall be provided, at least one of which shall fire inspector or the Office of the State Fire Marshal to inspect primary basement exit, the applicant/licensee may ask the 6

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group day care services in the basement area, the basement shall be approved as an area suitable for group day care

All walls and surfaces shall be free from chipped or peeling

Walls of rooms that children use shall be maintained free of lead paint. 11)

Furniture and equipment shall be kept in safe repair. 12)

First-aid supplies, medication, cleaning materials, poisons, and other hazardous materials shall be stored in places inaccessible to children. 13)

14) Tools and gardening equipment shall be stored in locked cabinets, if possible, or in places inaccessible to all children,

15) Exit doors shall be kept clear of equipment and debris at all times.

16) There shall be an operable telephone available on the premises of the licensee.

additional--25--square--feet--of--space-for-each-infant-or-toddler-who those areas in the home used for child care. The identified areas minus any special use areas shall be measured to calculate the square footage available for child care. There shall be: 1) A minimum of 35 square feet of floor space for each child in There-shall-be-a-minimum-of-35-square-feet-of-indoor-floor--space--per ehild--excluding-special-use-areas---Ploor-space-shall-be-uneneumbered except-by--equipment--required--by--this--Part.----There--shall--be--an steeps-and-ptays-in-the-same-indoor-area; The licensee shall identify Q

months of age when the play area is the same as the sleep applicant/licensee has adequate storage space for the bedding removed, the licensing representative shall approve the use of materials and the bedding materials are removed before and after However, if portable bedding is used for napping, An additional 20 square feet of floor space for each child 30 months of age when the classical space for each child for each child only 35 square feet of space

Indoor space shall consist of a clean, comfortable environment for children. ς O

observable hazards, properly lighted and heated, and free of fire well-ventilated, The group day care home shall be

The dwelling shall be kept clean, sanitary, and in good repair. 3)

There shall be provision for isolating a child who becomes ill or is suspected of having a communicable, infectious or contagious disease. When used for child care, basement floors shall have protective covering such as, but not limited to, tile, carpet, linoleum. Paint or sealer alone is not acceptable as to a protective covering. 4)

When infants-and-toddlers children under 30 months of age are in 2)

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be fitted with a sturdy gate or other barrier to prevent the stairs leading to second levels, attics or basements shall child(ren)'s access to the stairs without adult supervision.

preparation and serving of food, and shall be reasonably safe from kitchen shall be clean, equipped for the preservation, storage, q

Garbage and refuse containers used to discard diapering supplies, food products or disposable meal service supplies in areas for child care shall be cleaned daily with a germicidal solution unless plastic liners are used and disposed of daily. e

A safe and sanitary water supply shall be maintained. If a private water supply is used instead of an approved public water supply, the applicant shall supply written records of current test results indicating the water supply is safe for drinking. New test results must be provided prior to relicensing. If nitrate content exceeds parts per million, bottled water must be used for infants. (j

Hot and cold running water shall be provided. There-shatt-be-a temperature-control-to-maintain-hot-water-accessible-to-child(ren)--at a-temperature-of-no-more-than-120-degrees-Pahrenheit; 6

persons or portion thereof who are present during the hours the group caregiver(s), child care assistant(s), member(s) of the household and The group day care home shall provide one toilet for each ten (10) These ten persons include children other than infants-and-toddier(s) those under 30 months of is in operation. age for whom a potty chair is provided. home <u>ج</u>

least 25% of the required space shall be on the premises of the group There shall be a minimum of 75 square feet of outdoor space per child The remainder may be a public park, playground or other outdoor recreation area within walking distance (one thousand for the total number of children using the area at any one time. At the group day care home provided the caregiver or an adult assistant accompanies child(ren) to this outdoor area. day care home. feet) of <u>;</u>

There shall be safe outdoor space for active play. j

pools, traffic, and Space shall be protected by physical means or by adult caregiver Space shall be provided for play in yards, nearby parks supervision against all hazards such as playgrounds under adult supervision. 7

Further, outdoor space shall be partitioned or supervised in such a manner that young child(ren) are not Play areas shall be well drained and safely maintained. endangered by the activities of older child(ren). construction.

at or above-ground swimming pools located in The fence shall least 3 1/2 feet in height and secured by a locked gate. accessible to children shall be fenced. In-ground 3)

Portable wading pools shall be emptied daily and cleaned with a germicidal solution before being air-dried. 2)

child(ren) shall be closely supervised by the caregiver or adult assistant If public parks or playgrounds are used for play, the during play and while traveling to and from the area. (9

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- Supervision shall be provided during outdoor play by caregivers who meet the requirements of Section 408.45 below.
- A caregiver who relies upon outdoor space shared with other residents in a multiple family dwelling shall have a written agreement with the other resident(s) or the owner(s) of the outdoor area authorizing the use of the space by the group day care home and the children cared ŝ
- Insect and rodent control shall be maintained. 7
- outside doors except those with operable self-closing openings other devices, operable windows, and ventilation shall be screened. 1) All
- Chemicals for insect and rodent control shall not be applied in areas accessible to children when children are present. 2)
 - Healthy household pets which present no danger to children are permitted. 6
- A licensed veterinarian shall certify that the animals are free of diseases that could endanger the child(ren)'s health and that dogs and cats have been inoculated for rabies.
- If certification is not available, animals shall be confined at all times in an area inaccessible to child(ren).
 There shall be careful supervision of child(ren) who are
 - permitted to handle and care for the animals. 3)
- Immediate treatment shall be available to any child who is bitten or scratched by an animal. 4)
- The Department shall request that the inclusion of the Office Health or a local health department authorized by the department authorized by of the State Fire Marshal or the local fire department authorized by $\frac{1}{12}$ inspect the group day care home and its premises whenever the Department has reason to believe that conditions in the home or its premises pose potential health or safety hazard(s) to the child(ren) cared for in the home. <u>-</u> 6
 - There shall be plans for immediate evacuation in case of emergency. Fire drills shall be conducted monthly for the purpose of removing children from the home as quickly as possible. Tornado drills shall be conducted monthly for the purpose of getting children accustomed to moving to a position of safety in event of a tornado. Records shall be maintained of the dates and times required drills are conducted. The alphabetic card file required by subsection 408.120(c), shall accompany the caregiver during the drills.
- be evacuated immediately and the children's safety insured before calling the fire In the event of a fire, the group day care home shall department or attempting to combat the fire. a
 - except in the possession of peace officers or other adults who must Handguns are prohibited on the premises of the group day care possess a handgun as a condition of employment and who reside group day care home. 4476
- officer or other person as provided above, shall be kept in a disassembled state, without ammunition, in locked storage in a closet, firearm, other than a handgun in the possession of a peace r)9>

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other locked storage facility inaccessible to children. r such firearm(s) shall be kept in locked storage that of the disassembled firearm(s), inaccessible to Ammunition for such separate from children.

- s)r† The operator of the group home shall notify the parent(s) or guardian stored on the premises. The operator shall also notify the parent(s) or guardian that such firearms and ammunition are in locked storage inaccessible to children. Such notification need not disclose the location where the firearms and ammunition are stored of any child accepted for care that firearm(s) the Act).
- L)s† A group day care home operator relying upon a cooperative or lending arrangement to meet the equipment requirements of this Part shall a copy of a written agreement specifying which equipment operator shall demonstrate to the satisfaction of the Department that the equipment covered by the agreement is both available and utilized Further, required by this Part is covered by the agreement. by the group day care home as required by this Part. provide
- Operation of other business on the premises must not interfere with the care of children. rt+i
- communicable disease or requires care which adversely affects the persons except by permission of the Department. The Department shall grant such permission unless the person has a reportable contagious or chronically vlut A group day care home may not house bedridden or ability of the caregiver to supervise child(ren).

8950 Reg. 111. 16 at May 30, 1992 (Source: Amended

Section 408.35 General Requirements for Group Day Care Home Family

- Each caregiver, child care assistant and adult member of the household in a group day care home shall authorize the Department to conduct background check pursuant to Section 408.40. a)
- When notified by the Department that an employee, member of the household or other person in frequent contact with children at the Rev. Stat. 1987 1991, ch. 23, pars. 2051 et seq.), the licensee shall facility is the subject of a formal investigation for child abuse or neglect pursuant to the Abused and Neglected Child Reporting Act (Ill. take reasonable action necessary to insure that the employee or other person is restricted during the pendency of the investigation from contact with children whose care has been entrusted to the facility. removing the person from the facility, assuring that another adult is always present when the subject of the investigation is in contact Such reasonable action includes, but is not limited to barring household or other person in frequent contact with child(ren). a
- Members of the household who have contact with the child(ren) in care î
- shall treat them with respect, courtesy, and patience. The caregivers and all members of the household shall provide g

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may be transmitted while providing child care; and, in the case of caregiver(s), that they are free of physical or mental conditions which could interfere with the child care responsibilities. evidence that they are free of a reportable communicable disease which

Caregiver(s) and members of a household shall have a tuberculin skin test administered by the Mantoux method in accordance with the rules of the Department of Public Health (77 Ill. Adm. Code 690.720). e e

child care may resume. Further, a child care assistant or substitute who does not reside in the group day care home diagnosed as having a Should the caregiver(s) or any member of the household be diagnosed as having a communicable disease for which isolation is required by the Department of Public Health (IDPH) or local health department, the group day care home shall not provide child care until notified by the public health agency that the infectious period has elapsed and that communicable disease for which isolation is required shall be barred from the home until the presence of such person is authorized by the IDPH or the local health department. f)

Heimlich maneuver and in cardiopulmonary resuscitation by the American least one person on the premises certified in first-aid, the Red Cross or the American Heart Association. The caregiver(s) shall During the hours of operation of the group day care home, there have on file current certificates attesting to the training. 6

The operator(s) of the group day care home (the caregiver(s)) shall carry public liability insurance in the single limit minimum amount of \$100,000 per occurrence. 9

staff-to-child ratio required by Section 408.65 must be present, awake and free from responsibilities other than those directly related to the care and supervision of child(ren) when children are present. These responsibilities may include light housekeeping to maintain the including members of the household, counted in the area(s) wherein child care is provided. Person(s), ...

consume alcohol in the presence of child(ren). A caregiver or child care assistant who appears to be under the influence of alcohol or other drug shall not have responsibility of the care of child(ren). Caregiver(s), assistant(s) and other persons shall not smoke Ĵ

If the group day care home receives children for night-time care, the caregiver may sleep while children are present if the caregiver and the children sleep in the same area of the home and the children's bedrooms are within hearing distance of the caregiver's bedroom. 되

effective 8950 Reg. 111. 16 (Source: Amended at

Section 408.40 Background Checks

No individual may receive a license from the Department or-be-emptoyed in-a-group-day-care-home-licensed-by-the-Bepartment when the applicant or, an adult member of the household, or any individual who comes in regular and frequent contact with the children cared for in a day care a)

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home, or any employee of the day care home, has been determined to be a perpetrator of child abuse or neglect under Section 3 of the Abused and Neglected Child Reporting Act (III. Rev. Stat. 1907 1991, ch. 23, par. 2053) and who has been identified through circuit court (juvenile, criminal, civil) proceedings as having been a perpetrator of child abuse or neglect based on any one of the following:

- Brain damage or skull fracture Death
- Subdural injuries
 - Internal injuries
- Wounds (Gunshot, knife, or puncture)
- Sexually transmitted diseases 5)

Torture

- Sexual penetration
- Sexual molestation
- Sexual exploitation 10)
 - Failure to thrive
- Malnutrition
- Medical neglect of disabled infant
- the purposes of Section 408.40(a) identification through circuit court proceedings includes: â

parent, guardian or legal custodian or other person responsible for the child's welfare (as defined by Section 2054 of the Abused dependency is the result of abuse or neglect inflicted by a specific findings by a court that a child's abuse, neglect and Neglected Child Reporting Act).

criminal convictions and civil judgements regardless of the type of sentence imposed or amount of damages recovered for offenses relating to child abuse, child neglect or child sexual abuse resulting from jury trials, bench (court) trials or voluntary guilty pleas. 5

Prior to denying an individual a license or employment pursuant to subsection (a), the Department shall notify by certified mail the individual that he or she has been identified as a perpetrator of child abuse or neglect as described in subsection (a) above, and the Department shall provide the individual an opportunity to demonstrate that he or she is not the individual identified in the court finding, criminal conviction or civil judgement. ô

An individual requesting an opportunity for review pursuant to subsection (c) above shall submit such request, in writing, to the Department or the child care facility, as applicable, within ten (10) days of receipt of written notice of the Department's or child care facility's intent to deny a license or the Department's or child care facility's intent to deny employment. The individual shall be notified, in writing, of the date, time and location of the review. The individual may be represented by counsel of his or her choice, and individual shall be required to produce evidence that he or she is not the individual identified in the court finding, criminal conviction or may present evidence and/or witness(es) on his or her behalf. g

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in making the uodn judgement the Department has relied identification.

Evidence to be considered shall be limited to:

- a conviction arising from child abuse or neglect identified in the Illinois Department of State Police indicating an absence of Department Justice Fingerprints processed through the U.S. subsection (a) above; or
- court upon whom the Department has relied for the identification, Sworn statements from the law enforcement agency or clerk of the that the subject of the report provided to the Department is not the individual seeking licensure or employment. 5)
 - Except as provided in subsection (a) above, a person determined to be the perpetrator of an indicated incident of abuse or neglect under Section 3 of the Abused and Neglected Child Reporting Act shall not automatically be denied a license from the Department or be denied employment in a group day care home licensed by the Department. Rather, the Department shall provide the individual an opportunity demonstrates fitness for licensure employment. Such evidence shall include, but not be limited to: which evidence present (e
 - the nature of the abuse or neglect with which the individual was including whether the abuse or neglect resulted serious injury or death to a child or children; ident if ied, 1
- of the abuse or neglect, including the age of the perpetrator and the child(ren), that would demonstrate an unlikelihood of repetition; the circumstances surrounding the commission 5)
- occurred and whether prior incidents of child abuse or child neglect the period of time that has elapsed since the abuse or neglect have been indicated against the individual; 3)
- whether the abuse or neglect involved a single or multiple child victims; 4)
- educat ion, individual's current or prospective responsibilities within the the relationship of the incident of child abuse or neglect to employment, as of rehabilitation such group day care home; evidence 9
 - participation in therapy since the indicated incident(s) of abuse or neglect; and (9
 - character references. 7
- be prohibited from contact with child(ren) cared for in a group day care home solely because of the Except as stated in subsection (a) above, an individual convicted of a Instead, the Department shall consider the following: the type of crime for which the individual was convicted; automatically not will conviction. cr ime 7 (j
- the number of crimes for which the individual was convicted;
- the nature of the offense(s);
- the age of the individual at the time of conviction;
- crime and the capacity to care for the length of time that has elapsed since the last conviction; the relationship of the 9 5)
- evidence of rehabilitation; and 7)

children;

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character references. 8

effective 8950 Reg. 111. 16 at May 30, 1992 (Source: Amended

Section 408.50 Child Care Assistant(s)

- background check requirements in Section 408.40(a). The-person(s)-assisting-the-earegiver-shall-be--at t he passed have least-l6-years-of-age; shall Assistants a
 - employed in accordance with 56 Ill. Adm. Code 250, Illinois Child Part-time assistants shall be at least 14 years of age and five years older than the oldest child they supervise. Minor assistants shall Labor Law. ্ৰ
- Full-time assistants shall be at least 18 years of age.
- c) Full-time assistants snail be at account to the direct, personal b)d) Assistant(s) under age 18 shall work under the direct, personal b)d) Assistant(s) under age 18 shall work under the direct, personal supervision means the caregiver maintains audible or visual contact with the assistant and children on the premises at all times.
- accompany child(ren) playing outdoors and may transport children if the within-outdoors,-space-as-deseribed-in--subsection--488;30(j):---When assistant presents a valid driver's license and insurance. in-activity appropriately--licensedy--such--an--assistant-may-transport-child(ren) ete) An assistant eighteen 18 years of age or older may alone-with-the-approval-of-the-earegiver
 - capable d↑f) The assistant(s) shall be compatible with the caregiver, following directions, and responsive to supervision.
- e+g) The child care assistant(s) shall be able to relate well with child(ren).

effective 8950 Reg. 111. 16 **at** Amended May 30. (Source:

Section 408.55 Substitute(s)

- puriod not to exceed two weeks in a 12 month period. The supervising A--substitute--earegiver--may-be-utilized-in-the-home-on-two-oecasions per-month.---Por-purposes-of-this-Section,-an-oeeasion-is-defined-as-an white--ehild(ren)--are-in-eare. A substitute caregiver may be used in substitute to be used absence-of-the-primary-caregiver(s)-from-the-home-for-any-period--time the home up to 25 child care hours per month and for an additional during these periods meets the qualifications in Section 408.45. agency may approve additional time for family emergencies, continuing education when the and a)
 - A substitute caregiver shall be at least 21 years of age.
 - scheduled basis shall meet the requirements of Sections 408.35 and 408.40. G G
 - The parent(s) of children in care and the Department shall be notified Q

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of any substitution which occurs on a regular or scheduled basis or where in the caregiver is absent from the home for more than 24 consecutive hours during which children are in care.

numbers of additional adult(s) who would be available to assist in the The caregiver shall have on file the names, addresses, and home in an emergency. е Э

The caregiver shall have a plan worked out and understood by the parents in case the caregiver is ill or absent from the home due to an emergency. f)

8950 Reg. 111. 16 1992 (Source: Amended 30,

effective

Section 408.60 Admission and Discharge Procedures

- Child(ren) served in a day care facility shall not remain on the premises for more than 12 hours in any 24-hour period unless extra hours--of--day--care--are--required--by--the--parent-s/quardian-s-work schedules:---The-caregiver-shall-maintain-a-written-record-of-occasions parent's employment schedule requires more than 12 hours of day care. At no time shall child(ren) cared for in a day care facility remain on when-child(ren)-remain-in-the--home--in--excess--of--l2-hoursthe premises for 24 consecutive hours. a)
- become acquainted with the caregiver and with the service to be provided. â
 - without prior notice, during the hours their child(ren) is/are in to visit the home, permitted guardian shall be or The parent(s) ΰ
- The caregiver(s) shall conduct a daily, preadmissions screening to illness, other children present, and facilities available to provide If symptoms of illness are present, the caregiver shall determine whether or not to provide care for the child, depending upon the apparent degree care for the ill child in accordance with the requirements of determine if the child has obvious symptoms of illness. g
- temperature of 100 degrees Fahrenheit or higher) shall not be admitted the group day care home while these symptoms persist, and shall be as soon as possible should these symptoms develop while the Child(ren) with diarrhea and those with rash combined with fever (oral child is in care. removed e
- A child shall be discharged from the facility only to the child's parent(s) or guardian or to a person designated in writing parent(s) or guardian to receive the child. f)
- related or unrelated to the child, who has not been authorized, in writing, by the parent(s) or guradian to receive the child. Persons not known to the caregiver shall be required to provide a driver's The caregiver shall refuse to release a child to any person, whether 6

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Illinois Secretary of State to establish their identity prior to a card issued by the photo identification license (with photo) or child's release to them:

discharge the child at least once per week. These persons, in addition to the parent(s) or guardian, shall constitute the primary child left the facility (whether on foot, by passenger car, by taxicab by the parent(s), or guardian to whom the facility can be expected to persons to whom the child may be released. In addition, the by the parent(s) or guardian to whom the child may be released to a person on the contingency list, the facility shall date and time that the child was released, and the manner that the The facility shall maintain a list of persons designated, in writing, facility shall maintain a contingency list of persons designated, released less frequently than once per week. When the child maintain a record of the person to whom the child was released, or other means of transportation.) writing, 2

a child leaving the group day care home to attend school shall be released in guardian. Such authorization shall include the time that the child is to be released and the means of transportation the child is to use. Other discharge provisions of this Section notwithstanding, accordance with the written authorization of the <u>;</u>

Reg. 111. 16 May 30, 1992 (Source: Amended

Section 408.65 Number and Ages of Children Served

- children under the age of 12, including the caregiver's The maximum number of children cared for in a group day own children, related children, and unrelated children. a)
 - The-maximum-number-of-children-permitted--in-a--group--day--care--home shait--be--i2--chiidren-under-the-age-of-i2;-inciuding-own-chiid{ren}; related-child(ren)-and-unrelated-child(ren)-40
- assistant must be present when more than six (6) such children are Twelve (12) children between 3 and 6 years of age may be cared for a caregiver and an assistant eighteen-{18} years of age or older. Q
- Except as provided by subsection (b) above, the number of children to care home at any one time (license assistant are present shall be capacity) when a caregiver and assistant determined in accordance with the following: be served in the group day c)
- No more than four (4) children under 15 months of age shall cared for in a group day care home; and
- No more than six (6) children under 30 months of age shall be no more than cared for in a group day care home; and of which four (4) children may be under 15 months of age; 5)
- No more than ten-(10) twelve (12) children under six (6) years of age shall be cared for in a group day care home÷ of which no more than six (6) children may be under 30 months of age and four (4) 3)

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under 15 months of age.

- years--of--age-or-oider-prior-to-and-after-schooi-attendance--At-other times-{including-holidays,-vacations-and-weekends}-such-children-shall A-caregiver-aione-may-care-for-up-to--tweive--{i2}--children--six--{6} be-supervised-by-a-caregiver-and-an-assistant-eighteen-(18)--years--of age-or-oider-whenever-their-number-exceeds-eight-{8}; d)
- Except--as-provided-in-subsection-(d)-above,-the-number-of-children-to be-served-in-the-group-home-at-any-one--time--that--the--caregiver--is 0
- No--more--than-three-(3)-children-under-30-months-of-age-shall-be present-atone-shalt-be-determined-in-accordance-with-the-foltowing: ++
- No-more-than-five-(5)-children-under-six-(6)-years-of--age--shall cared-for-in-a-group-day-care-home;-and 27
- No--more--than-eight-(8)-children-may-be-cared-for-in-a-group-day care-home-when-one-or-more-of-the-chiłdren-is/are-under--six--{6} be-cared-for-in-a-group-day-care-home;-and years-of-age: 1 + E
- A caregiver alone may care for: al
- A mixed age group consisting of:
- $U_{\rm P}$ to eight children under twelve years of age, of which $U_{\rm P}$ to five children may be under five years of age, of which
- than three children may be under 24 months of age; more S. 되필의
- Up to eight pre-school children if no child is under age three; 2)
- Up to twelve school age children as defined by Section 408.5.
- children who are attending school full-time if a part-time limited to before and/or after school, holidays, weekends, during addition to the children who may receive day care in accordance unforeseen school closings, and during the summer. The assistant the event of a brief unforeseen school closing, the caregiver may is obtained. Care provided for children who attend school full-time with the requirements above, a group day care home may accept shall be present at all times when school children are present. before and/or after school assistant is employed and a fire In e 4
- the licensee may develop a transition plan which will be compliance with the capacity requirements, as long as the total number The caregiver shall maintain a record of the dates, names When acceptance of siblings of children who are already in care will of compliance with the established age of children under age 12 in the home does not exceed the maximum of accept one additional school-age child and still be considered and ages of the children for whom this care was provided. licensee out place the children. 6
- The licensee is not currently operating under a transition plan and is in full compliance with all the licensing standards, and The plan may be approved when:

submitted to the licensing representative for review and approval.

- siblings has been in care for 30 days the one of least more, and
- The transition plan will bring the home back into compliance with 7

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date the established age groupings within six months of the

- increase in licensed capacity to the maximum. A decision licensed as of the effective date of these amendments who regarding the increase in capacity shall be rendered within ninety days of receipt of the request. Decisions shall be made in accordance compliance with the standards of this Part may request with the amended standards of this Part. writing an Caregivers in ful 리
- The Department shall propose amendments, as The Department will review the impact of this Section on licensed day care homes and on the safety and well-being of the children and the This Section is effective for a two-year period ending March 31, 1994. indicated, no later than July 1, 1993. caregiving environment. .

effective 8950 Reg. 111. 16 (Source: Amended at Way 30, 1992

Section 408.70 Bealth and Medical Care

- file for each child and shall be dated no earlier than 6 months prior A medical report, on forms prescribed by the Department, shall be on to enrollment. a)
- Code (Ill. Rev. Stat. 1987 1991, ch. 122, par. 27-8.1), provided 1) The medical report shall be valid for two years, except that accordance with the requirements of Section 27-8.1 of the School subsequent examinations for school-age children shall be copies of the exam are on file at the facility.
- only. The test shall be administered by the Mantoux method in accordance with the rules of the Illinois Department of Public A tuberculin skin test shall be included in the initial exam Health. 5)
 - immunized as required by the rules of the Illinois Department of Public Health poliomyelitis, measles, rubella, diphtheria, mumps, pertussis, immunizations The report shall indicate that the child has been required and tetanus; and haemophilus influenzae B. These immunizations. for 3
- In accordance with the Child Care Act of 1969, as amended, a parent may request that immunizations, physical examinations, medical treatment be waived on religious grounds. request for such waiver shall be, in writing, signed by parent, and kept in the child's record. and/or 4)
- be subjected to immunizations or tuberculin test shall be so Exceptions made for children who for medical reasons should not indicated by the physician on the child's medical form. 2
 - infectious, contagious, or communicable disease for which isolation is A child suspected of having or diagnosed as having a reportable Procedures for the Control of Communicable Disease (77 Ill. Adm. Code required by the Illinois Department of Public Health's General shall be excluded from the home until the Illinois 690.1000) a

NOTICE OF ADOPTED AMENDMENT(S)

authorized contagions infectious stage of the disease has passed and that the child may Department of Public Health or local health department in writing, that the communicable, re-admitted to the group day care home.

Necessary medications shall be administered according to specific instructions. ô

child's name, the physician's name, the name of the drug store or pharmacy, prescription number, date of the prescription, and directions for Prescription medicine labels must bear the administering.

administered upon written parental permission which specifies the duration and frequency of medication. Such medication shall be administered in accordance with package instructions, and shall Nonprescription medication provided by the parent(s) may be be labeled with the child's name and dated. 5

There shall be a signed statement by the child's parent or permission to the caregiver to administer medication to the child. guardian giving <u>e</u>

The caregiver shall maintain a record of the dates, hours and dosages which are given. 4

Additionally, medication provided for a child no longer cared for in the facility and medication which has Medication shall be returned to the parent(s) when it is reached its expiration date shall be destroyed. longer required. 6

Medical services, such as direct medical care to the child, shall be administered as required by a physician, subject to the receipt of appropriate releases from parent(s). (9

å shall Personal hygiene standards, such as the following, observed: q

articles are 1) Each child shall be provided with an individual towel, washcloth, ö A twin size bed may be used, for 2 children under age 4, provided playpen with individual bedding shall be provided for each child. A separate sleeping arrangement, such as a bed, cot, crib, disposable Single-use, drinking cup. acceptable. and 5

The bed shall be kept in a clean and sanitary condition at all times, and bedding shall be suitable for the season. each child shall have individual sheets. æ

Family beds may be used for child(ren) if separate linens are used. B)

Rubber sheets shall be used when necessary. ပ

caregiver shall require parent(s) to supply clothing suitable weather conditions, as well as a complete change of clothing in case of need. The to to e

Caregiver(s) and child(ren) shall wash and dry their hands before with and after contact meals, after toileting, secretions. 4

Open cuts, sores or lesions on caregiver(s) or child(ren) shall 2

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Caregiver(s) shall wash their hands prior to food preparation and after any physical contact with a child during food.preparation.

Sheets shall be changed when soiled and at least weekly. Hands shall be dried using single-use towels.

changed

Clothing soiled due to toilet accidents shall be

6 3

- In order to reduce the risk of infection or contagion to others, there must be space provided in the group day care home for the isolation and observation of a child who becomes ill. An ill child shall be provided a bed or cot away from other children and a caregiver or assistant shall supervise the child at all times he/she is in the e
- When a group day care home admits an ill or injured child(ren), a plan for the care of such child(ren) must be agreed upon with the parent(s) to assure that the needs of the child(ren) for rest, attention, child requiring exclusion from the home in accordance with 77 Ill. personal care and administration of prescribed medication are met. Adm. Code 690 may be admitted. £)
- Caregiver(s) shall take reasonable measures to reduce the spread of communicable disease among children in the facility by observing such procedures as: 6

Using only washable toys with diapered child(ren) au_L

3 6

Washing toys mouthed by one child before they are used by another Washing washable toys at least once per day; Cleaning facility-provided stuffed toys at-least-once-per-week; 4

child; and

Washing pacifiers and other items placed in the mouth if dropped to the floor or ground. 9

There shall be an emergency plan for each child in case of accident or sudden illness. 2

The caregiver shall have available at all time the name, address, relative, friend, or physician, and the Department and telephone number where the child's parents or 7

There shall be a planned source of readily available emergency medical care; a hospital emergency medical room, clinic, child's physician. 5)

reached.

When the caregiver accompanies a child to the source of emergency care, an adult must assume supervision of other child(ren) in the 3

supervising agency responsible for the child shall be notified or accident, the parent, guardian, In case of illness 4

effective Reg. 111. 16 at May 30, 1992

Section 408.105 Infants-and-Toddlers Children Under 30 Months of Age

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- A--group--day-care-home-receiving-chiid{renj-within-the-in£ant∕toddier age-range-shait-compiy-with-the-standards-prescribed-for--group--day care--homes--except-when-inconsistent-with-the-special-requirements-in this-Section: Children under 30 months of age shall not be permitted bathrooms, kitchens, or hazardous areas without the caregiver or assistant present. a)
- Infants-and-toddlers Children under 30 months of age shall be provided (q
- a daily program that is designed to meet their needs. 1) The caregiver(s) shall demonstrate warm, positive feelings toward each infant child through actions such as hugging, patting, smiling, and cuddling.
 - Routines such as naps and feedings shall be discussed with the parents and shall be consistent with the child's routine at home. 5)
 - Infants Non-mobile children who are awake shall be moved to different positions and shall be held, rocked, and carried about. 3)
- The caregiver(s) shall frequently change the place, position, and toys available for infants $\frac{1}{2}$ room. 4)
- Consistent toilet training shall be undertaken at a time mutually agreed upon by parent(s) and caregiver in accordance with the child's age and/or stage of development. 2)
- Child(ren) shall be taken outdoors for a portion of every day, or unless when weather permits, except when the child is ill indicated otherwise by parent(s) or physician. (9
- ing schedules and procedures shall meet the developmental needs of the child(ren). <u>σ</u>
- þe home and feeding schedules of infants children shall established to coordinate with parent(s)' schedules at to allow for nursing. infants: Flexible 7
- Infants Children who cannot yet turn over alone shall be placed after feeding unless contraindicated on their abdomens physician. 5)
- they Children up to 6 months of age shall be held while being When The bottle must be propped at any time. bottle-fed. Infants Children of more than 6 months may be infants children are old enough to hold their may feed themselves without being held. removed when the child has fallen asleep. Bottles shall not be needed. 3
- to Fnfants Children shall be allowed and encouraged themselves when they indicate a readiness to do so. 4)
- month may Safe finger foods such as those which dissolve in the be provided. 9
 - each ot Hands shall be washed and and dried before the feeding Proper standards of hygiene shall be observed in the home. 7 g
- child's formula is brought in by the parent, it shall be labeled and refrigerated. 5)
 - All utensils shall be washed after each use. 3
- Foods stored or prepared in jars shall be served from a separate 4)

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shall be discarded. Leftovers in the jar shall be labeled with the infant's child's name, dated, refrigerated, and served within Any leftovers from the serving dish each infent child. 24 hours or discarded. dish for

- A toilet shall be easily accessible so that the contents of reusable diapers may be disposed of before placing the diapers in disposed of in accordance with the manufacturer's instructions. the diaper pail. Disposable diapers and their contents shall 2)
- Person(s) changing diapers shall wash hands under running water with soap after each change of diaper. Hands shall be dried with plastic gloves shall be worn when changing a child who has watery rubber single-use towels. Additionally, disposable latex, or bloody stools. (9
- child whose diapers are being changed is to be washed on the hands and anal area if there has been defecation or if irritation is present. 7
 - shall be diapered in their own cribs, at a central diapering area on a surface that is sanitized after each use, or on a disposable paper sheet which is disposed of after each diapering. Infant(s)-and-toddler(s) Children 8)
- The toilet seat, if soiled, or potty shall be cleaned after every 6
- Soiled diapers shall be changed promptly. 10)
- 11) Sheets shall be changed when soiled, and all sheets shall be changed routinely two times per week. 12) All beds shall be wiped clean as often as necessary.
 - - 13) Toys and equipment shall be kept clean.
- ρλ nine (9) parts water or other germicidal solution approved by the blood or body fluids. The germicidal bleach solution shall be made Centers for Disease Control shall be used to clean surfaces soiled A germicidal solution of one (1) part household chlorine bleach fresh daily. e
- oţ The equipment must be appropriate to the developmental needs child(ren) in care. f)
 - or port-a-cribs for infants shall be equipped with good firm, proof materials that can be well-constructed individual cribs, playpens, Washable cots may be used for teddlers; children of water fitting mattresses made months of age and over. Safe, sturdy,
- Sleeping equipment for infants children under 15 months must have protection to prevent falls. 5)
- There shall be no more than one-and-one-half inches of space between the mattress and bed frame when the mattress flush at one corner of the crib. 3)
- Bed linens used on the cots, cribs, or playpens shall be safe, tightly fitting, and washable. 4
 - Conveniently located, washable, plastic-lined covered receptacles shall be provided for soiled diapers and linens. 9
 - A toilet seat or potty shall be provided. (9

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- of the materials must be appropriate to the developmental needs 6
- shall be made for an adequate supply of individual diapers, clothing, powder, oil, etc. Provision
- or Cribs shall be equipped with brightly colored hanging toys mobiles. 5
- under 30 months of age infants-and-toddlers to observe, grasp, There shall be a variety of toys and art materials for pick up, and manipulate. 3
 - toys, pounding toys, large hollow blocks, or large balls Pull 4)
- shall be available for development of large muscles. Equipment and play materials shall be durable and free from characteristics that may be hazardous or injurious to infants-and tedditers children under 30 months of age. Hazardous or injurious characteristics include sharp, rough edges; toxic paint; and objects small enough to be swallowed. 2

effective 8950 Reg. 111. 16 rce: Amended at May 30, 1992 Amended (Source:

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ILLINOIS HEALTH CARE COST CONTAINMENT COUNCIL

NOTICE OF ADOPTED AMENDMENTS

- Heading of Part: Data Collection 7
- Code Citation: 77 III. Adm. Code 2510 8
- Adopted Action: Section Numbers: ଳ

Amendment Amendment Amendment Amendment Amendment 2510.Appendix B 2510.Appendix C 2510.50 2510.60 2510.70

Statutory Authority: Implementing Article IV and authorized by Section 2-3 of the Illinois Health Finance Reform Act (III. Reve. Stat. 1991, ch. 111 1/2, pars. 6504-1, et seq. and par. 6502-3)

4

- Effective Date of Amendment: June 3, 1992. ଜ
- Does this rulemaking contain an automatic repeal date? No. 6
- Does this amendment contain incorporations by reference? No. ~
- Date Filed in Agency's Principal Office: May 27, 1992 8
- Notice of Proposal Published in Illinois Register: 15 III. Reg. 17444 December 6, 1991. ගි
- Has JCAR issued a Statement of Objections to this Rule: No. 0
- Difference between proposal and final version: Suggestions of the Administrative Code Unit were incorporated. Pursuant to agreements with the Joint Committee on Administrative Rules, Section 2510.60 was modified to provide for review of E
- Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes. 2
- Will this amendment replace an emergency amendment currently in effect? No. 3

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- Are there any amendments pending on this Part: No. 4
- revise confidential data fields and subfields, and removes provisions providing for Summary and Purpose of Amendment: The amendments change record formats; magnetic tapes of diskettes of final edited data. 3
- Information and questions regarding this adopted amendment shall be directed to: 6

Springfield, Illinois 62701 516 East Monroe Street John Noak Suite 200

The full text of the Adopted Amendments begins on the next page.

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ILLINOIS HEALTH CARE COST CONTAINMENT COUNCIL

NOTICE OF ADOPTED AMENDMENT(S)

ILLINOIS HEALTH CARE COST CONTAINMENT COUNCIL TITLE 77: PUBLIC HEALTH CHAPTER XI:

DATA COLLECTION PART 2510

Section

AUTHORITY: Implementing Article IV and authorized by Section 2-3 of Article II of the Illinois Health Finance Reform Act (Ill. Rev. Stat. 1991, ch. 1ll 1/2, Illinois Health Care Cost Containment Council Annual Financial Collection and Submission of Hospital Financial Data Hospital Transmittal For UB-82 Discharge Data Collection of Information on Uniform Billing Form Submission of Medicare Cost Reports Magnetic Media Record Format Report of Inpatient Discharges Special Studies and Analysis pars. 6504 et seq. and par. 6502-3). UB-82 Data Fields Outside Contractor Quarterly Reports Data Report Confident iality APPENDIX B APPENDIX C APPENDIX D APPENDIX A 2510.60 2510.50 2510.55 2510.70 2510.80 2510.10 2510.20 2510.30 2510.40

SOURCE: Adopted and codified at 9 Ill. Reg. 12726, effective August

Reg./1574, effective January 2, 1987; amended at 12 111. Reg. 6102, effective March 21, 1988; amended at 13 111. Reg. 334, effective December 30, 1988; amended at 14 111. Reg. 2078, effective January 19, 1990; amended at 16 111. Reg. 8980..., effective June 3, 1992...... amended at 10 Ill. Reg. 18790, effective October 17, 1986; amended at 11 Ill. Reg. 8980

Section 2510.50 Collection of Information on Uniform Billing Form

for submitting patient charges for payment from public and private system shall be based upon the adoption of the Uniform Hospital Billing Form Uniform Billing 82/Health Care Financing Administration 1450 (UB-82/HCFA 1450) ("UB-82") hereinafter developed by the National Uniform Billing Committee. Section 4-2 of the Illinois Effective January 1, 1985, all hospitals shall adopt a uniform system Health Finance Reform Act (Ill. Rev. Stat. 1987 1991, ch. 111 1/2, Adoption of Uniform Billing Form UB-82/HCFA 1450 a

all third-party payors, including but not limited to, licensed insurers, medical and hospital service corporations, health maintenance organizations, and self-funded employee health plans, to Effective January 1, 1985, The Department of Insurance shall require Acceptance of UB-82 insurers, medical â

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Uniform Hospital Billing Form UB-82 prior to October 1, 1985. Section however, nothing in this Chapter shall prevent all such third-party payors from requiring additional information, including but not limited to itemized bills, necessary to determine eligibility for benefits or liability for reimbursement for services provided. The without attachment; Illinois Department of Public Aid shall not be required to accept 4-2 of the Illinois Health Finance Reform Act (Ill. Rev. Stat. accept the Uniform Hospital Billing Form UB-82, 111 1/2, par. 6504-2). 1991, ch.

Filing of UB-82 Information with the Council Û

Extracts of UB-82 bills for inpatient services shall be prepared by hospitals according to the following regulations.

- discharges occurring during the first calendar quarter of 1985 on data processing equipment capable of producing data in one of the acceptable magnetic formats specified in subsection (2) below shall file hard copy UB-82 information with the Council. Such information shall be filed with the Council on a UB-82 form or a facsimile of UB-82 with the confidential fields specified in All hospitals may file UB-82 discharge data with the Council for hard copy. Subsequent to that period, only hospitals not having subsection (e) below deleted. _
 - Data Submission Standards 5
- After submission of first quarter 1985, UB-82 data extracts shall be submitted in a magnetic format if the hospital is equipped with data processing equipment capable of producing of magnetic tape, recorded in 9 track, Extended Binary Coded Decimal Interchange Code mode, with density equal to 1600 types per inch ("BPI") or 6250 BPI. Acceptable formats for submission of data on floppy disk will be determined by the specifications of the magnetic tape shall be any size reel The physical data in one of acceptable magnetic formats. Council.
- record-tength-shoutd-be-572-and-the-biocking--factor--shoutd be--i0;-i:e:;-BbKSi8E-equals-5720;-Each-file-submitted-is-to contain-one-header-record;-the-UB-82--łogicał--records;--and one--trailer--record---The-header-record-is-the-first-record the--fite---Pormats--for--these--records--are--presented-in The--tape--shait--have--standard--tabets--or--be--untabeted; Non-standard--tabets--shoutd--not--be-utitized;--The-togicat on-the-file,-and-the-trailer-record-is-the--last--record--on Appendix-B-Ħ
- descriptions of the media, blocks and records shall be as indicated in Appendix B of this Part. Physical and logical defined and modified by the Council from time to time. in records be submitted data shall a
 - Revisions of data originally filed on a magnetic format must be filed on a magnetic format reporting the entire logical record for each record changed. Û
- Por-each-patient,-the-data-elements-described-in--subsection Ð

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be--recorded--onto--a--magnetic-tape-in-the-format-described below:--in-all-instances--data--elements--contained--on--the (d)-below-form-a-record-of-572-characters---Bach-record-must uniform-bill-(UB-82)-will-be-recorded-in-accordance-with-the requirements---for--completing--the--form--as--described--in subsection-(d)-below:--The-precise-record-format-is-as-found in-Appendix-B-

For each patient, the data elements described in subsection (d) below form a record of 572 characters. Each record must be recorded onto a magnetic tape in the format described below. In all instances data elements contained on the uniform bill (UB-82) will be recorded in accordance with the requirements for completing the form as described in subsection (d) below. The precise record form is as found a

five percent (5%) of all discharges must be filed within one hundred eighty (180) calendar days of the last day of the calendar month in which the patient was discharged or died. (95%) of all discharges within sixty (60) calendar days of the last day of the calendar month in which the patient was in Appendix B of this Part. Hospitals shall file complete UB-82 data for ninety five percent discharged or died. The complete UB-82 data for the remaining Hospitals will be allowed twenty (20) calendar days to correct any UB-82 data submission errors identified by the Council. 3

Illinois Department of Public Aid shall report to the Council the patients for whom a bill is generated exclusively for the data listed in subsection (d) below for the discharges occurring Hospitals will not be required to file UB-82 information Illinois Department of Public Aid until October 1, 1985. 4

during the period January 1, 1985, through September 30, 1985. Required UB-82 Data ĝ

coded according to the Council's requirements as found in Appendix C Insurance, and Public Health, shall establish a system for the collection of the following information from hospitals utilizing the discharge regardless of payor and shall include the UB-82 data fields The Council, in cooperation with the State Departments of Public Aid, raw data available on the uniform hospital billing form UB-82. data determined as necessary by the Council shall be filed

confidential by the Council and may not under any circumstances data fields UB-82 filed with the Council: following

Confidential UB-82 Data

e

have been determined to

Descript ion Subfield Field

- Patient's Address (except zip code) Patient's Name n/a n/a 0.
- Responsible Party Name and Address

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	Insured's Certificate Number, Social Security	Number, Health Insurance, Identification			
	cate Number,	Insurance,		Employee Identification Number	
Name	Certifi	Health		Ident if ic	
Insured's Name	Insured's	Number,	Number	Employee	Remarks.
n/a	n/a			n/a	
6.5	68			74	64

Hospital Identification Number (j

UB-82 records filed with the Council. Hospitals not participating in the Medical Assistance Program shall immediately request a number be Public Aid is the required assigned by the Council. The request shall be made to the Executive The Medicaid identification number assigned by the Medical Assistance hospital identification number and shall be recorded in field 8 on all Program of the Illinois Department of

made to the Executive Director. The identification number must be obtained and used if the plan or fund desires to obtain reports on its Self administered insurance plans and health and welfare funds may request an identification number from the Council. The request shall Self Administered Insurance Plan Identification Number members from the Council. pe 6

licensed under the Hospital Licensing Act (III. Rev. Stat. $\pm 987~\underline{1991}$, ch. lll 1/2, pars. 1542 et seq.) from the filing of UB-82 data with the data from these hospitals are not essential to its data base and its concomitant health care cost comparison efforts. In determining Licensing Act anticipating compliance to impose an undue economic Council if the Council finds that compliance would impose undue economic hardship on the hospital and if the Council determines that Council will consider the cost to the hospital, both in relation to initial costs to obtain the capability to generate data in this format, and the routine cost of generating such data compared to the Hospitals with less than fifty (50) beds licensed under the Hospital hardship may file with the Council a request for an exemption. Such whether compliance will constitute an undue economic hardship the ability of the hospital to absorb the added cost of such production. The Council shall exempt hospitals with fewer than fifty (50) request must document the undue economic hardship. Small Hospital Exemption <u>ا</u>

Hospitals shall file the required UB-82 data specified in this 'Part for each discharge. Sample Size

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Beginning with the payment for the July to December 1987 semi-annually in January for correct discharge data appearing on the Illinois data appearing on the Illinois Health Care Cost Containment UB-82 data base for the previous July 1 to December 31 period. Under the intent of this provision, there will be no January 1988 Health Care Cost Containment UB-82 data base for the previous January 1 to June 30 period and in July for correct discharge discharge period, reimbursement will be made Payment for Submission of UB-82 Data

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hospitals that have submitted seventy-five percent (75%) correct of all discharges shall be \$420.00. Beginning with the payment to July 1, 1988 and December 31, 1988, and payments thereafter, each The payment to be made January 1, 1989, for hospital discharges be made July 1, 1989 for hospital discharges occurring between be made hospital that has submitted eighty-five percent (85%) correct of \$420.00. Hospitals that do not meet the threshold percentage of in July 1988; payment will be made every six months thereafter. all discharges shall be reimbursed at a semi-annual rate payment. The first payment under this revised rule will occurring between January 1, 1988, through June 30, correct discharges shall not be reimbursed. 5)

effective Reg. 111. 16 at une 3, 1992 (Source: Amended

Section 2510.60 Quarterly Reports

entity, if applicable, shall prepare quarterly basic reports in the aggregate identify errors they or their agents may have made in the coding of claims data submitted to the Council. Such reports shall also show, to the extent on health care costs and trends in Illinois. The Council shall provide these reports to the public, if requested. These shall include, but not be limited comparative information on average charges, total and ancillary charge number of discharges, compited compiled in aggregate by hospital, by to review the accuracy of any reports before they are policy for the submission and correction of claims data for a given calendar quarter, at intervals of approximately two weeks, the Council shall prepare and distribute, at no charge to Illinois hospitals, reports which profile claims data for open quarters in aggregations which reasonably allow hospital staff to to publication of claims information for a given quarter, for hospital staff to reports or displays may be viewed either in the Chicago or Springfield offices of the Council. Council shall require and the designated corporation, association or such that hospitals may exercise judoment regarding the consistency of the their data. The Council shall also provide, during the ten business days prior access displays or reports showing some or all of the elements of some or all components, length of stay on diagnosis specific and procedure specific cases, released. Periodically during the time frame provided by Rule and Council reasonable, the results of transformations or groupings made by the Council Council's application of established transformations to and aggregations of shall permit The Council diagnosis, and by primary payor category. right the submitted to providers to,

8980 Reg. 111. 16 June 3, 1992 (Source: Amended

Section 2510.70 Special Studies and Analysis

NOTICE OF ADOPTED AMENDMENT(S)

- quarterly reports, the Council shall respond to special studies and analysis (hereafter referred to as a requests by agencies of government and organizations in the private to Sections 2510.30 and No such requests shall be accepted by the "compilation of data") collected pursuant Council prior to October 1, 1985. 2510.50 of this Part. to the addition a)
- magnetic tape or diskette containing selected non-confidential data For purposes of this Part, a compilation of data is defined as elements, a hard copy report or both. a
 - provided in Section 2510.30 of this Part. Only the UB-82 information which can be released under the requirements of the Act shall be Special studies and analysis shall not be subject to The Freedom of Information Act. Nothing-in-the-Act-or-this-Part-shait diskette--containing-a-copy-of-that-hospital-s-final-edited-data-as-it analysis which is not permitted to be released for other purposes by specific financial information shall be released except as prevent-a-hospital-from-receiving-or-requesting--a--magnetic--tape--or exists-in-the-possession-of-the-Council-for-each-individual--discharge for--which-information-was-originally-submitted-to-the-Council-by-that The Council shall not release any information for special studies No patient identifiable information shall be released. released. hospital Û
 - requester, and providing a short description of the request on its official meeting agenda. Such requests shall be approved only by the vote of a majority of the members of the Council who shall designate the form in which the information shall be made available. The approval or denial by the Council of requests for compilations of data purpose. No person or group may request such compilation of data compilation to a legitimate purpose. A "legitimate purpose" is a The Council shall review each request for a compilation of data and notify the public of requests made for compilations by listing the for--which-information-was-originally-submitted-to-the-Council-by-that hespital; The Council may deny a request for a compilation of data for reasons including, but not limited to, unavailability of data; the requested compilation of data is already available from the Council or another source; the requested compilation of data would endanger patient confidentiality; or the request is not related to a legitimate Executive Director. The written request shall at least contain the name, address, and telephone number of the requester; a description of the requested compilation of data; a short, plain statement of the reason for the request; and the relationship of the requested purpose consistent with the intent, policies, and purposes of the Act, determine whether to approve or deny the request. The Council shall shall be within the discretion of the Council. The Council. howeverr-grant-any-request-from-a-hospital--for--a--magnetic--tape--or diskette--containing-a-copy-of-that-hospital-s-final-edited-data-as-it exists-in-the-possession-of-the-Council-for-each-individual--discharge All requests for compilations of data shall be made in writing to hespital: q e)

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- Denial of a request shall include a brief explanation of the reason shall notify the requester in writing of its decision. for the denial. £)
- consultation with the Council shall also determine a fee to be charged to the requesting agency or private sector organization to cover the direct and indirect costs for producing special studies and analysis, of any reports before they are released. Such review period shall not and shall permit affected providers the right to review the or The Council or designated corporation, association exceed fifteen (15) days. 6
- after receipt of the report from the Council without the prior written requesting entity the Council. Requests for such approval should be filed with the Executive Director. The -- requirements -- of -- this -- subsection shaii-notr-howeverr-appiy-to-a-magnetic-tape-or-diskette-provided-to-a hospital--containing-a-copy-of-that-hospital-s-final-edited-data-as-it exists-in-the-possession-of-the-Council-for-each-individual--discharge for--which-information-was-originally-submitted-to-the-Council-by-that No compilations of data shall be released by the approval of hospital: 2
- determining the cost of producing studies, the Council will perform an analysis of the direct and indirect costs associated with the analysis pursuant to this section shall be deposited in the Illinois Special Studies Fund. Funds received by the Council for requests for special studies Health Care Cost Containment Council's production of the study. : Ę

 - Direct costs will be determined by the following steps:
- Assessment and Analysis Request initial review of request to determine its objective, scope and consistency with statute, administrative rule and agency policy; assignment of request to project management staff. A)
- Request Initiation and Feasibility Study technical review request to determine its completeness, difficulty and likely agency costs/staffing needs to complete the request; draft staff recommendations to the Council for their review and disposition. B
 - of data and methodology necessary to fulfill the request; specify System Analysis and Design - detailed identification inputs, outputs and evaluation criteria. Û
 - programs required to process raw data into necessary report and Testing - develop/test Program/Development â
- Implementation execute computer programs established in Subsection subsection (j)(1)(B). E
- execution to verify the correctness of processing. (Internal Post Implementation Evaluation - review results of E
- Development and Review of Data Analysis review results in terms of other independent analyses, prevailing theories and 6

concerning another person or group.

NOTICE OF ADOPTED AMENDMENT(S)

demonstrations of data analysis established in subsection Subsection (j)(l)(G). Present to Council for final review Preparation of Final Report - prepare text, tables research theses. (External Validity Checks) and approval. Ê

2+2) Direct costs will include both labor and non-labor costs. Labor direct costs will be calculated by recording the actual hours by Council staff or outside consultants performing the by the appropriate hourly rate for the grade and title of the consultant will be contained in the consultants' negotiated contract. Non-labor direct costs such as computer CPU time and costs of computer paper, online storage lease charges, tape mount access to proprietary databases), printing, magnetic slide preparation, acquisition of source materials, books and pass-thru of the actual costs incurred. All computer costs associated with the generation of the request on the State's functions enumerated in Subsection (j)(l)(A through H) multiplied staff member or consultant. The appropriate hourly rate for a tape or diskettes, and any other associated required materials or journals) will be recorded and allocated to the study as a direct related computer expenses, (e.g. including but not limited to, supplies (e.g. including but not limited to, costs of postage, Central by the Department of Consolidated Computer Facility (CCF) will be charged determined Management Services (DCMS) rate prevailing charges,

Indirect Costs will be charged at the rate of 35% percent of direct Š

The Council will maintain accurate records to record all direct and indirect costs associated with a study and provide these to the requestor upon completion of the study. 7

effective 8980 Reg. 111. 9 I at (Source: Amended

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Section 2510. APPENDIX B Magnetic Media Record Format

MAGNET FEE-MEBIA-RECORB-FORMAT APPENB1X-B

HEADER RECORD

Data Element	Data Element Description	Position From To	ion To	Length	Picture	Format
1	Hospital ID Number (Medicaid Provider Number)	7	12	12	4	
7	Hospital Name	13	52	40	4	
m	Hospital Street Address	.53	92	40	∢	
4	Hospital City	93	112	20	ď	
2	Hospital Zip Code	113	117	5	z	
9	Contact Person	118	157	40	ď	
7	Telephone Number	158	167	10	z	(
co	Period Covered First Day	168	173	9	z	MMDDYY
	Last Day	174	179	9	z	MMDDYY
¥6	Press Filler	180	572	393 588	4 4 1	

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		Format	MMDDCCYY		Unknown = 00000 Foreign = 99999	Blank Fill	Left justify, space fill right	Left justify, space fill	right	Left justify, space fill	right	ммрруу				ммрруу	Left justify, space fill right; do not include decimal	Left justify, space fill	right; do not include decimal
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CE OF A	LOGICAL RECORD FORMAT	UB-82 Item	12	13	11 (part)	N/A	57A	57B	1	57C		15	18	17	4	22 (part)	77	78	
NOTI		Data Data Element Element Description	Patient Date of Birth	Patient Sex	Patient Zip Code	Filler	Individual Payer ID Number	Individual Payer ID Number		Individual Payer ID Number		Date of Admission	Source of Admission	Type of Admission	Discharge Date (type of bill)	Discharge Date	Principal Diagnosis	Other Diagnosis	
		Data Element	٦	2	3a	3Ъ	4 a	4p		4c		S	9	7	8	8p	9a	9 <i>b</i>	

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	ON	TICE OF A	NOTICE OF ADOPTED AMENDMENT(S)	NDMENT (S	_			ŎN	TICE OF A	NOTICE OF ADOPTED AMENDMENT(S)	NDMENT (S)		
Data Element	Data Data Element Element Description	UB-82 Item	Position From To	Length	Picture	re Format	Data Element	Data Element Description	UB-82 Item	Position From To	Length Picture Format	Picture	Format
						May be negative (credit) Right justify zero fill left; if credit amount multi punch (11) over units position	_						May be negative (credit) Right justify zero fill left; if credit amount multi punch (11) over units positlon
13t	Revenue Code	51 t	403 405	e.	æ	Left justify	13w	Revenue Code	51W	448 450	9	4	Left justify
13t	Units of Service	52 t	406 408	e	z	Rlght justify, zero fill left	13w	Units of Service	52w	451 453	m	z	Right justify, zero fill left
13t	Charges	53¢	409 417	a	z	Asy be negative (credit) Right justify zero fill left; if credit amount multi punch (11) over units position	13.6	Charges	S3.€	454 462	ō	z	S9(7)V99- May be negative (credit) Right justify zero fill left; amount multi punch (11) over units position
13u	Revenue Code	51u	418 420	e	<	Left justify	14	Attending Physician ID number	ا 92	463 472	10	4	
13u	Units of Service	52u	421 423	ĸ	z	Right justify, zero fill left	15	Hospital ID Number	æ	473 484	12	: «	
13u	Charges	53u	424 432	6	z	S9(7)V99- May be negative	16	Patient Control Number	£ 1	485 501	17	æ	
						(credit) Right justify zero fill left;	17a	Insured's Group Number	. 70a	502 518	17	æ	
						if credit amount multi punch (11) over	17b	Insured's Group Number	3 70b	519 535	17	∢	
13v	Revenue Code	51 v	433 435	æ	4	units position Left justify	17c	Insured's Group Number	2 70c	536 552	17	æ	
13v	Units of Service	52 v	436 438	e	z	Right justify,	18	Other Physician ID	93	553 562	10	•	
1	;	;	:	,	:	zero tili jett		Filler		563 572	10	æ	Blank Filler
13v	Charges	53v	439 447	o	z	S9(7)V99-	19	Remarks	94	573 767	195	& I	

NOTICE OF ADOPTED AMENDMENT(S)

If there are more than twenty-three (23) entries in the charge fields on a patient's bill, file two (2) or more records for the patient's bill, as necessary, and code data elements 1, 2, 5, 8b, 11, 15 and 16 on all records.

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ILLINOIS HEALTH CARE COST CONTAINMENT COUNCIL

NOTICE OF ADOPTED AMENDMENT(S)

TRAILER RECORD

Dat a Element	Data Element Description	Position From To		Length	Picture Format	Format
	Hospital ID Number (Medicaid Provider Number)	1	12	12	∢	
	Number of Records (Logical Records contained in the file excluding the Header and Trailer Records)	1 13	17	S	Z	
	Filler	18 572 <u>767</u>	<u> 191</u>	555750	∢	Blank Filler
· (So	(Source: Amended at 16	111.	Reg.	8980	30	effective

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NOTICE OF ADOPTED AMENDMENT(S)

Section 2510. APPENDIX C UB-82 Data Fields

APPENBIX-C UB-02-BATA-FIELBS

UB-UZ-BATA-FIEBBS	Required Field(s) Requirements	12 As stated in UB-82 For Illinois manual.	13 As stated in UB-82 For Illinois manual.	11 Only the zip code portion of this field is required. Code as stated in UB-82 For Illinois manual.	llinois Department of Insurance numbers are required for commercial isurers. The Blue Cross codes listed in the UB-82 manual are required for Blue Cross plans. Self-administered plans will be assigned a number upon request as provided in subsection (9) of Section 2510.40 and hospitals are required to use such numbers where applicable in field 57. If any hospital has less than one-half of one percent (0.05%) of its discharges for a particular payor identification number in the prior quarter, it may report these discharges to the Council as "other". However, if the payor ID number presented by a patient is presented on an indlyidual identification card shown by the patient at the time of admission the discharge information must be reported to the Council for that patient using the identification number.	15 As stated in UB-82 For Illinois manual.
	Element	Patient date of birth	Patient sex	Patient zip code	Third-party Coverage	Date of admission
	Data	;	2.		4	5.

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	Source of admission	18	As stated i manual.	in UB-82	For	Illinois
7.	Type of admission	117	As stated i manual.	in UB-82	For	Illinois
&	Discharge date	4,22	As stated i manual.	in UB-82	For	Illinois
o,	Principal and up to four other diagnoses	77-81	As stated i manual.	in UB-82	For	Illinois
10.	Principal procedure and date	82,84	As stated i manual.	in UB-82	For	Illinois
11.	Patient status	21	As stated in manual.	in UB-82	For	Illinois
12.	Other procedures and dates	98,86	As stated in manual.	in UB-82	For	Illinois
13.	Total charges and components of those charges	51-53	The number of un where applicable. UB-82 For Illinois	5 0	is e as ual.	required stated in
14.	Attending physician ID number	92	Physician's state license the required ID number, attending physician does valid license number, Chief of Service's ID.	's state license lired ID number. p physician does cense number, e Service's ID.	icense number number. Il number, number not leber, enter ID,	number is If the not have a
15.	Hospital ID number	ω	The Medicaid number is the required hospital ID number. Hospitals not participating in Medicaid will be assigned a number as provided in subsection (f) of Section 2510.40.	id number is number. F ng in Medi number as (f) of Secti	r is the requestals Hospitals Medicaid wi as provided	oer is the required Hospitals not Medicaid will be as provided in Section 2510.40.
16.	Patient control number	m	As stated in Manual. This the patient's	n UB-82 F s field may s social	For ay not	UB-82 For Illinois field may not contain social security
17.	Insured's group number	7.0	Required whe stated in UB-	where applicable. As UB-82 For Illinois Manual.	applicable. Illinois M	e. As Manual.
18.	Other physician ID		If applicable physician's stat	e and atelice ID num		known the number is If the

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other physician does not have a valid license number, enter the Chief of Service's ID.

effective 8980 Reg. 111. 16 (Source: Amended at June 3, 1992

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DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF ADOPTED RULES

- Heading of the Part: Medicaid Community Mental Health Services Program 7
- Code Citation: 59 Ill. Adm. Code 132 5

Adopted Action:		New Section New Section			New Section New Section		New Section	-			New Section New Section			New Section New Section				New Section			Ś	New Section		
3) Section Numbers:	132.10	132.20 132.25	 	 132.60 132.65	132.70	132.80	132.85	132.90	132.100	132.105	132.110 132.115	132.120	132.125	132,130	132.140	132.145	132.150	132.155	132,165	132.170	132.Appendix A	132.Appendix B	Table A	Table C

AND DEVELOPMENTAL DISABILITIES DEPARTMENT OF MENTAL HEALTH

NOTICE OF ADOPTED RULES

- 100-5; implementing Ill. Rev. Stat. 1991, ch. 911, pars 100-15.3 and 901 ch. 911, pars. 5-104 Ill. Rev. Stat. 1991, Statutory Authority: 4
- Effective Date of Rules 2
- May 29, 1992
- Š. Does this rulemaking contain an automatic repeal date? 9
- amendments contain incorporations by reference in accordance with Section 6.02(a) of the Illinois Administrative Procedure Act (Ill. Rev. Stat. by reference? incorporations 1991, ch. 127, par. 1006.02(a)). Do these amendments contain 2
- Date Filed in Agency's Principal Office: May 28, 1992 8
- Notice(s) of Proposal Published in Illinois Register: January 3, 1992 (16 Ill. Reg. 7) 6
- Has JCAR issued a Statement of Objections to these amendments? 10)
- Difference(s) between proposal and final version 11)

comments ţ response changes in received from the Administrative Code Division: The Department made the following

The headings of the supplementary material in Appendix B were relabeled and the table of contents was revised to reflect this change.

"(p)hysician" in this Section and "1991" for "1989" and "1990 Supp." were substituted wherever the Illinois Revised Statutes were cited in this In Section 132.25, the opening statement was moved further to the left margin. The date "1991" was added to the citation in the definition of

various Acts referenced in the definitions of "(q)ualified mental health professional (QMHP)", "(r)ehabilitative services coordination", The Administrative Code Division recommended that the citations for the "(r)ehabilitative services and review", "(r)ehabilitative services plan", "(r)ehabilitative stabilization services" be added in if they had not Administrative Code Division made the same comment on Section been previously cited. All referenced Acts had been previously cited. 132.150(e)(1)(B). Again, the citation had already been given.

definitions of "Medicaid case management", "Medicaid clinic option (MCO)" and "Medicaid rehabilitative services option" of Section 132.25; and to phrase "of this Part" was added to Sections 132.10(a); the Sections 132.160 and 132.165(a).

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NOTICE OF ADOPTED RULES

The Department made the following changes in response to public comment:

The headings of Sections 132.40 and 132.120 were changed in the table of contents and in the narration.

- The word "rehabilitative" was substituted for the word "rehabilitation" Section 132.10(d)(2) and (4)

first line was deleted. The phrase "under the statutes cited in subsections (a) and (b) above" was added after the phrase "client rights" in the first line and the phrase "by the client" was added before the Section 132.20(e) - The word "any" before the word "restriction" in word "pursuant" in the fifth line.

Section 132.20(g) - The phrase "(except when such decisions are reviewable by the provider's governing board, in which case the governing board's decision is final)" was added after the phrase "administrative decision" in the second sentence. Section 132.25 - A definition for "(a)daptive functioning, stabilization and developmental interventions" was added.

In the definition of "(a)dult", the phrase "or a person who is emancipated pursuant to the Emancipation of Mature Minors Act (Ill. Rev. Stat. 1991, ch. 40, par. 2201 et seq.) was added after the word "older". In the definition of "(c)lient-centered consultation", the phrase "within or" was deleted before the word "between", the word "the" after the word "between" and the phrase "and staff of other agencies" before the phrase "or with others" were added and the word "provider" was substituted for the word "providers" in the second line.

"licensed" was substituted for the word "provided" before the phrase the definition of "(c)ommunity-based rehabilitation", the "under 59 Ill. Adm. Code 115". In the definition of "(f)amily", the phrase "private individual" was substituted for the phrase "non-agency" before the word "guardian(s)". In the definition of "(g)uardian", the phrase "and/or estate" before the phrase "under the Probate Act of 1975" was deleted. In the definition of "(i)ndividual counseling", the phrase following final word "problems" was deleted.

In The definition of "(i)ndividual/family social rehabilitation training" was changed to "(i)ndividual/family social rehabilitation".

NOTICE OF ADOPTED RULES

was substituted for the phrase "periodic formal" before the word "sessions" in the fourth line. The phrase following the phrase interpersonal or community adaptive functioning which are based on a 'activities" in the second line was deleted. The phrase "goal-directed" emotional, cognitive, the phrase "skills acquisition" before the clearly defined format which specifies the expected outcome" "social, of" was rewritten as that definition, 'improvement

In the definition of "(1)evel of role functioning", the word "the" was added before the final phrases "GAF Scale" and "CGAS Scale".

In the definition of (m)ental health assessment, the phrase "or personal contact" was substituted for the word "process" after the phrase "face-to-face". In the definition of "(p)sychological assessment", the phrase "consistent with the Clinical Psychologist Licensing Act" was added after the word "psychologist". In the definition of "(p)sychological rehabilitation day program", the second sentence following the word "community" was deleted. In the last sentence the phrase "and adaptive functioning, stabilization and developmental interventions" was substituted for the phrase following the word "counseling". In the definition of "(q)ualified mental health professional", the phrase "(a) social worker" was substituted for the phrase "(a)n individual", and the phrase "or dectoral" after the word "master's" and the word "and" before the word "licensed" were added to the fourth subsection of this definition. In the last subsection, the word "doctoral" was substituted for the word "doctorate"; the word "who" before the phrase "has one year" and the phrase following the word "professional" was added.

In the definition of "(r)ehabilitative services associate (RSA)", the last sentence was deleted. In the definition of "(r)ehabilitative services consultation and review", the parenthetical phrase following the word "disciplines" was deleted.

In the definition of "(r)ehabilitative transition linkage and aftercare" the word "is" was substituted for the word "are" before the phrase "being moved" in the third line.

The definition of "(s)kills development and training" was deleted

Section 132.30(a) - The phrase "or youth services" was added after the phrase "child welfare services" in the first sentence.

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Section 132.30(d) - The title of the application form was changed.

substituted for the word "planning" after the word "applicant" and - The word "intending" phrase "under this Part" was added after the word "contract". (4) Sections 132.30(d)(1),(2),(3), and

Section 132.30(f)(1) - In the third sentence, the word "of" was added before the word "Medicaid".

Section 132.30(f)(3) - The last sentence was added.

Was provider" "certified substituted for the word "applicant" in the first line. The phrase Section 132.30(f)(3)(A)

subsections Section 132.30(f)(3)(B)(C)(D) and (E) - These sub reorganized and rewritten. A new subsection (C) was added. Section 132.30(g) - In the second sentence, the word "a" before the word "complete" and the word "application" after the word "complete" were deleted; the word "applications" was substituted for the word "application" following the phrase "pertaining to".

Section 132.30(g)(4)(F) - In the first sentence, the word "provider" was substituted for the word "applicant". In the second sentence, the word "correction" was substituted for the word "corrections". Section 132.30(h) - The phrases "or DCFS" and "be reviewed for" following the second end parenthesis and the reference to 132.90 were deleted. The words "have" following the phrase "shall not"; "and" before the reference to 132.75; "examined" following the reference to 132.75; the phrase following the word "review" and the last sentence were added.

þę to (¥) Section 132.30(1) - Deleted, causing subsections (j) and relabeled (i) and (j).

Section 132.30(1)(relabeled) - The word "affect" was substituted for the word "effect" in the second line.

Section 132.35(a) - The phrase "within 20 working days" was added after the word "certification" in the fourth line.

Section 132.35(b) - The phrase "within 40 working days" was added after the word "deficiencies" in the first sentence. In the last sentence, the comma following the word "years" was deleted. Section 132.35(d) - The phrase "shall be conducted" was substituted for the phrase "is an on-site survey" following the word "review" in the

NOTICE OF ADOPTED RULES

first line. In the third line, the phrase "for additional programs" after the word "sites", was deleted. The phrase "services and/or" before the word "sites" and the last sentence were added.

Section 132.35(f) - The final word "review" was substituted for the word "reviews".

Section 132.40 - The heading was changed to add "and/or new site(s)".

Section 132.40(a) - The word "shall" was substituted for the word "must" before the word "submit".

Section 132.40(a)(1) - The "(s)" was added to the word "service" in the last line.

Section 132.40(a)(2) - The phrase "local fire authority" before the word "clearance"; the phrase "the notarized" before the word "statements"; and the word "see" after the word "professions" and the sentence following the cross-reference to Section 132.90 were deleted. The phrase beginning with the word "from" and ending with "Marshal" after the word "letter"; the phrase following the word "professions" and the end parenthetical sentence were added.

Section 132.40(b) - Added, causing subsections (b) and(c) to be relabeled (c) and (d).

Section 132.40(c)(relabeled) - The phrase "or new site(s)" was added after the word "services".

Section 132.40(d) - The phrase "and/or (2)" was added before the word "above".

Section 132.40(d)(1) - The phrase "and/or new site(s)" after the word "service(s)" in the third and seventh lines; the phrase beginning with the word "with" after the word "issued", and the last two sentences were added. The phrase "and the specific site(s)" before the last sentence was delayed.

Section 132.40(d)(2) - The phrase "or new site(s)" after the word "service(s)" and the phrase "and/or (2)" after the phrase "(a)(1)" were

Section 132.40(d)(2)(A) - The parenthesis around the "s" on services, the phrase "/or", the word "new" before the word site(s) and the phrase following the word "issued" were added. The phrase "the specific" before the word "site" was deleted.

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Section 132.40(d)(2)(B) - The phrases "conduct a focused" before the word "review", "to verify" after the word "review" and the end phrase beginning with the word "plan" and last sentence were added. The word "the" before the word "implementation" and the phrase following the phrase "implementation of the" were deleted.

Section 132.45(b)(3) - The word "if" was substituted for the word "of" following the cross-reference to Section 132.55.

Section 132.55(b)(1) - The word "annual" before the word
"recertification" in the second line was deleted.

Section 132.80(a) - In the third line, the word "modified" was deleted before the word "accrual" and the reference to the Generally Accepted Accounting Principles was added and the statutory reference was deleted.

Section 132.80(b) - The phrase "annually an independent audit" was substituted for the phrase "an annual audit" following the word "submit" in the first line.

Section 132.80(f) - The letter "d" in the last word "department" at the end of the first sentence was put in lower case.

Section 132.80(h) - The phrases "prescription, review" after the word "medication" in the second line, "all inclusive" before the phrase "per client" and the phrase "hour rate" before the word "payable" were deleted. The phrase "self-administration" before the word "training" and the phrase "hourly rate" after the phrase "reimbursed at an" were added.

Section 132.80(1) - The phrase "hourly rate per client payable to the nearest hour" and the last sentence were substituted for the phrase following the phrase "at an" in the second line.

Section 132.85(a)(2) - The phrase "including actual time and amount of time", was added after the word "services in the second line and the cross reference to Section 132.100(h) were added.

Section 132.90(c) - The comma following the word "Section" was deleted.

Section 132.95(b)(1) - The phrase "representative of the staff providing the services which may include QMHPs, MHPs and RSAs, and" was added after the word "committee". Section 132.95(c) - The phrase "clients served under this Part" was substituted for the phrase "Medicaid-eligible client caseload".

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- The word "findings" before the word "determinations" Section 132.95(e) the UR phrase Section 132.95(£) - The phrase "by clients and staff affected by decisions with which they designee" was substituted for the following the word "appeal".

- The phrase "the informed" before the word "consent" Section 132.100(b) was deleted.

after the word phrase "and actual time" - The Section 132.100(h)(2) "date" was deleted.

Section 132.100(h)(4) - The word "and" was added

- Deleted, causing subsection (6) to be relabeled Section 132.100(h)(5) Section 132.100(h)(7) - Relabeled as Section 132.100(i) and rewritten causing subsections (i), (j), (k), and (l) to be relabeled as subsections (j), (k), (l), and (m). Sections 132.100(1) and (1)(relabeled) - The end punctuation was changed from commas to semicolons.

Section 132,100(1)(relabeled) - The phrase "that occur at the site with regard to a specific client, whether" after the word "incidents" and the word "and" after the word "observed" were added. Section 132.105(c) - The word "interagency" before the word "agreements" was deleted. Section 132.110(b) - The phrase beginning with the word "flexible" was substituted for the original language.

Section 132.115(a) - The phrase "apply for and" after the word "which" and the phrase "elect to be certified" were deleted. Section 132.115(a)(4) - The phrase "physician direction pursuant to subsection (b) below" was substituted for the phrase "the direction of a physician". Section 132.115(b) - In the fourth line the phrase "45 days" was substituted for the phrase "30 days". In the eleventh line the phrase "all clients" was substituted for the phrase "adults or at least once every three months for children and adolescents".

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Section 132.115(e) - In the last sentence, a comma was substituted for the word "and" after the word "records", the phrase "utilization review" substituted for the phrase "quality assurance" before the word the word "site(s)" was substituted for "documents" and

Section 132.120 - The heading was changed to "Service needs evaluation".

Section 132.120(a) - The phrase "or any individual referred pursuant to a recommendation resulting from an early and periodic screening, diagnostic and treatment (EPSDT) examination was added after the word "court" in the first sentence. In the second sentence the phrase "a preliminary assessment" after the word "include" was deleted; a comma was substituted for the semicolon following the phrase "mental health assessment" and the word "assessment" was substituted for the word "evaluation" following the word "psychological".

Section 132.120(b) - Rewritten.

Section 132.120(b)(1) and (2) - Relocated to subsection (f).

Section 132.120(b)(3) - Deleted.

Section 132.120(C) - The phrase "service needs evaluation" was substituted for the phrase before the word "shall"; the phrase "or referral" was substituted for the phrase "by the client" after the word "request" and the comma after the word "situation" was deleted. Section 132.120(d) - In the first line, the phrase following the word "client" and before the word "shall" was deleted and the phrase "development and implementation of the ITP" was substituted for the phrase following the phrase "prior to the". Section 132.120(e) - The word "written" was substituted for the word "informed" before the word "consent" and the word "/or" was added after the word "and". causing Section 132,120(f)(1) and (2) - Added 'from subsection (b), subsections (1) through (10) to be relabeled (3) through (12).

the ģ - The phrase "informed of services offered Section 132.120(g) - The phrase "informed of services offe provider and shall be" before the word "apprised" was deleted. Section 132.120(h) - The phrase "who has had" was added after the word "QMHP" in the second line.

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substituted for the word "evaluation" after the word "psychological". In the next to the last sentence, the numeral "45" was substituted for "30" after the word "physician" in the second line; the phrase "signed and dated progress rate or a date and" was deleted after the phrase and a period added in this same line. The phrase "(t)he directing physician" was added before the phrase "shall make a determination" in the fourth line. In the sixth and ninth lines, the word "assessment" was Section 132,120(1) - In the first sentence, the word "and" was added substituted for the phrase "assessment with a statement and he or she" a" in the second line; the phrase "the ITP" before the word "days". "documented by

word Section 132.120(1) - The word "evaluation" was added after the "psychiatric" and the word "assessment" was substituted for the "evaluation" after the word "psychological".

The numeral "45" was substituted for the numeral Section 132.125(c) - The nu "30" before the word "days". Section 132.125(g) The word "all" was substituted for the word "adult" before the word "clients" and the phrase "and quarterly, at a minimum, for children and adolescents" after the word "clients" and before the phrase "by the directing" was deleted.

Section 132.130(c)(2) - The word "and" was added.

Section 132.130(c)(3) - A period was substituted for the semicolon.

Sections 132.130(c)(4) and (5) - Deleted.

Section 132.130(d)(2) - The word "adult" was added before the word following the word "clients" in the first line was deleted and a "clients" in the first line; the comma and the phrase "groups of clients" semicolon after the word "agreement" and the phrase "with groups of clients; or with a child or adolescent client and/or his or her family", before the word "based" were added. Section 132.130(f) - The phrase ", or for psychotropic medication monitoring and training, an MHP under the supervision of a QMHP" was added after the phrase "by a QMHP".

Section 132,130(a)(2)(B) - The word "and" after the semicolon was added.

Section 132.135(a)(2)(C) - A period was substituted for the semicolon and

Section 132,135(a)(2)(D) - Deleted.

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the word "basis". In the second line, the word "an" was substituted for the word "a" following the word "minimum", the word "preliminary" before the word "assessment" was deleted and the cross-reference was corrected Section 132,135(a)(4) - The phrase "or personal contact" was added before to read "Section 132,120(f)".

a day, five days per week" was substituted for the phrase "billable in Section 132,140(a)(4) - The phrase "available for a minimum of four hours hourly increments for a maximum of four hours daily" after the phrase "shall be".

Section 132.140(a)(4)(A) - The final word "and" was added.

Section 132.140(a)(4)(B) - A period was substituted for the semicolon.

Sections 132.140(a)(4)(C) and (D) - Deleted.

Section 132.140(a)(5) - The phrase "a day, five days a week" was substituted for the word "daily" after the phrase "four hours" in the second line.

Section 132.140(a)(5)(B) - The word "and" was added.

Section 132.140(a)(5)(C) - Rewritten

Sections 132.140(a)(5)(D) and (E) - Deleted.

Section 132.140(b)(2)(B) - The phrase "adaptive functioning" was substituted for the phrase "living skills" after the word "independent". Section

Section 132.140(c)(1) - The phrase "services shall be prescribed physician and delivered by a QMHP," was added after "stabilization". Section 132.140(c)(2) - The word "QMHP" was substituted for the phrase "mental health professional" after the phrase "(FTE)".

phrase for Section 132.140(c)(3) - The word "MHP" was substituted "mental health professional" was after the word "FTE". Section 132.145(a) - The phrase "apply and" was deleted after the word "which".

Section 132.145(a)(1) - The phrase ", at a minimum," was added before the word "directly", and the phrase "rehabilitative mental health services" after the word "following" was deleted.

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Section 132.145(a)(1)(D) - The phrase "and training" after the word "rehabilitation" was deleted.

Section 132.145(b) - The cross-reference in the last sentence were corrected to "Section 132.150 and Section 132.150(j)".

Section 132.150(a) - The phrase "as defined in Section 132.25" was added after the word "illness".

Section 132.150(c)(1) - The word "or" in the second line after the word "services" was deleted. In the third line, the phrase following the word "court" and before the phrase "shall receive" was added.

Section 132.150(c)(2) - The phrase "face-to-face or personal contact" was substituted for the phrase "mental health assessment which is based on an" before the word "interview" and the phrase "and collaterals, as indicated" was added after the word "client".

Section 132.150(c)(3) - The phrase "service needs evaluation" was substituted for the phrase following the initial word "(t)he" and before the phrase "shall be initiated" and the phrase "or referral," was substituted for the phrase following the word "request" and before the phrase "or immediately".

Section 132.150(c)(4) - The phrase following the word "client" and before the phrase "shall receive" in the first sentence was deleted. In that same sentence, the phrase "development and implementation of an ITP" was substituted for the phrase after the phrase "prior to the".

Section 132.150(c)(5) - The word "written" was substituted for the word "informed" before the word "consent"; the phrase "/or" was added after the word "and" in the third line and the word "as" was substituted for the word "if" before the word "applicable".

Section 132.150(c)(6)(A) - The cross-reference was corrected to "Section 132.100(a)".

Section 132.150(c)(7) - The phrase "who has had" was substituted for t phrase "and shall include" after the word "QMHP" in the second line. Section 132.150(d)(3) - The numeral "45" was substituted for the numeral
"30" in the first and third sentences.

Section 132.150(d)(6) - The word "health" was added after the word "mental" in the first sentence.

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Section 132.150(e)(1)(D) - The phrase "self-administration" was added before the word "training".

Section 132.150(e)(2)(B) - The word "and" was added.

Section 132.150(e)(2)(C) - The period was substituted for the semicolon and the final word "and".

Section 132.150(e)(2)(D) - Deleted.

Section 132.150(e)(3)(B) - The word "/or" was added after the word "and" before the word "his".

Section 132.150(f)(4) The phrase "or personal contact" was added before the word "basis" in the first sentence.

Section 132.150(f)(7) - The phrase "a QMHP under the supervision of" was deleted before the phrase "a QMHP who is".

Section 132.150(g)(4) - The phrase "a day, five days a week" was substituted for the word "daily" after the word "hours".

Section 132.150(g)(4)(A) - The word "and" was added.

Section 132.150(g)(4)(B) - The period was substituted for the semicolon and the word "and".

Section 132.150(g)(4)(C) - Deleted.

Section 132.150(g)(5) - The phrase, "a day, five days a week" was substituted for the word "daily" after the word "hours" and the phrase "adaptive functioning" was substituted for the phrase "living skills" before the phrase "to restore".

Section 132,150(g)(5)(B) - The word "and" was added.

Section 132.150(g)(5)(C) - Rewritten.

Section 132.150(g)(5)(D) - Deleted.

Section 132.150(g)(7) - The phrase "individual skill acquisition in" was deleted after the word "address".

Section 132.150(g)(7)(B) - The phrase "adaptive functioning, stabilization, and developmental interventions" was substituted for the phrase "skills training".

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- The phrase following the word "(1:15)" was Section 132.150(g)(9)(D) added. Section 132.150(h) - The phrase "goal-directed" was substituted for the word "formal" before the word "sessions" and the phrase "improving adaptive functioning deficits" was substituted for the phrase "acquisitions of skills". Section 132.150(h)(3) - Deleted, causing subsections (4),(5), and (6) to be relabeled (3),(4), and (5).

Section 132.150(h)(3)(relabeled) - The phrase "adaptive functioning" substituted for the word "skills" before the word "deficits" and phrase "and training" after the word "rehabilitation" was deleted.

The phrase "and training" after the ı Section 132.150(h)(5)(relabeled) word "rehabilitation" was deleted.

Was "be licensed in accordance" Section 132.150(1) - The phrase "be licensed is substituted for the word "comply" in the second line. Section 132,150(j)(2)(B) - The word "for" before the word "involved" was

- The phrase "and training" after the word Section 132.150(k)(1)(B)(111) "rehabilitation" was deleted. Section 132.155(a) - The word "require" was substituted for the word "requires" in the third line.

Section 132.155(c)(2) - Rewritten.

- Deleted. Section 132.155(c)(2)(A),(B), and (C) Section 132.155(d)(1) - The word "supervising" before the word "QMHP" at the end of the second sentence was deleted.

Section 132.155(d)(2) - A comma and the word "and" was substituted for the semicolon before the word "meeting" and the end phrase beginning with "and time" and ending with "approval" was deleted.

Section 132.155(d)(3) - The numeral "45" was substituted for the numeral "30".

Section 132.155(4)(5) - The phrase "Section 132.150(4)" was substituted for the phrase "this subsection".

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- The word "supervising" before the word "QMHP" was Section 132.155(d)(7)

Section 132.155(f)(3) - The phrase "or personal contact" was added before the word "intervention".

ê Section 132.155(g)(2)(A) - Deleted, causing subsections (B),(C), and to be relabeled (A), (B), and (C). Section 132.155(h)(3) - The word "associate" was substituted for the word "assistant" before the word "(RSA)".

Section 132.165(a) - The phrase following the word "illness" through the end of this subsection was deleted.

Was Section 132.165(b)(4) - The phrase following the word "availability" added.

was Section 132,165(d)(1) - The phrase following the word "receiving" substituted for the original language.

Was "support" - The word "for" following the word Section 132.170(b)

Section 132.Appendix A, item (6) - The parenthetical statement was added.

Section 132.Appendix A, item (8)(a) - The cross-reference was corrected to "Section 132.80(g)".

Section 132.Appendix A, item (8)(b) - The cross-references were corrected to "Section 132.115 and 132.145.

Section 132. Appendix A, item (9) - The phrase "or youth" was added.

column, the word "assessment" was substituted for the word "evaluation". This same change was made in the second footnote. Section 132.Appendix B, Table A - In the second item under the first

Section 132.Appendix B, Table B - Replaced with a revised table.

- Replaced with a revised table. Section 132.Appendix B, Table C The following changes were made as of results of agreements made with JCAR (most changes are technical and were not included in the agreement

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Section 132.10(a) - The date in the ninth line was corrected to read "1991". This same change was made in Section 132.25 in the definition of "Medicaid". Section 132.25 - In the definition of "(f) amily" the word "more" was substituted for the word "mare" before the word "adult" in the first

In the definition of "(g)roup therapy", the word "seen" was substituted for the word "seem" in after the word "illness" in the third line. In that same definition, a comma was added after the word "emotional" in the fifth line.

In the definition of "(i)ndividual therapy", the comma after the word "positive" in the fifth line was deleted.

the word "location" was substituted for the word "locations" in the third In the definition of "(i)ntensive family-based services for adolescents",

a comma was added In the definition of "(1)evel of role functioning", after the phrase "limited to" in the last line. In the definition of "Medicaid case management", the comma was deleted after the word "Act" in the second line.

In the definition of "(o)ccupational therapy", an end period was added.

In the definition of "(q)ualified mental health professional", a comma was added after the word "field" in the fourth line in the last subsection. In the sixth subsection, the end word "or" was added. the definition of "(r)ehabilitative assessment", a comma was added after the word "and" in the third line. п

crisis intervention and In the definition of "(r)ehabilitative crisis intervention' and stabilization", the word "client" was substituted for the word "child" in the sixth line. In the definition of "(r)ehabilitative counseling", the word "desired" was deleted before the word "necessary" in the third line.

In the definition of "(r)ehabilitative services associate (RSA)", the word "and" was deleted after the word "children" in the fifth line.

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"to" was added before the word "access" and the word "recommended" was In the definition of "(r)ehabilatitive services coordination", the word deleted after the word "access" in the fifth line.

in the In the definition of "(r)ehabilitative stabilization services", were added before the word "which" and after the word "setting" second sentence. In the definition of "(r)ehabilitative transition linkage and aftercare", commas were added after the word "responsible" in the third line and the word "development" in the seventh line. The word "that" was substituted for the word "which" after the word "arrangement" in the fourth line.

In the definition of "(s)ubstantial impairment of role functioning", a comma was added after the word "and" in the fifth line. Section 132.30(a) - In the second line a comma was added after the word "services" and the word "with" was added before the word "DCFS". In the third line, a comma was added after the word "services". Section 132.30(f)(3) - The second sentence was rewritten to read: "The Department or DCFS shall also issue to the applicant, within 40 working days, a notice of deficiencies enumerating those standards of this Part with which the applicant is not in compliance." Section 132.30(f)(3)(A) - The word "after" was substituted for the word "of" after the word "days" in the second line.

Section 132.30(f)(3)(B) - The first sentence was rewritten to read "The Department or DCFS shall notify the certified provider within 20 working days after receipt and approval of the plan of correction. Section 132.30(f)(3)(E) - The word "after" was substituted for the word "of" following the word "days".

Section 132.30(g) - A comma was deleted after the reference to Appendix A in the second line. In the sixth and eighth lines, the word "after" was substituted for the word "of" following the word "days". Sections 132.30(g)(1),(2), and (4) - The word "after" was substituted for the word "of" following the phrase "working days".

Section 132.30(g)(4)(C) - The last sentence was rewritten to read: The Department or DCFS shall also issue within 20 working days after the on-site review a notice of deficiencies to the provider enumerating those standards of this Part with which the provider is not in compliance."

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Sections 132.30(g)(4)(D) and (E) - The word "after" was substituted for the word "of" following the phrase "working days" The when the standard of the working the phrase "working days" word "of" following the phrase "working days". The phrase "the date of" before the word "postmark" was deleted. Section 132.30(g)(4)(F) - The first sentence was rewritten to read: "The Department or DCFS shall notify the provider and within 20 working days after receipt and approval of the plan of correction shall issue a letter approving continuation of the certification period." Section 132.35(a) - The word "extending" was added after the word "days"

Section 132.35(b) - The word "after" was substituted for the word "of" in the second sentence. In the last sentence, the word "extend" was substituted for the word "be" after the word "shall", and the comma after the word "years" was deleted.

Section 132.40(a) - The comma after the word "Part" was deleted and the word "that" was substituted for the word "which" after the word "Part".

Section 132.40(a)(2) - A comma was added after the word "professions" in the seventh line. Section 132.40(b) - The comma after the word "Part" and the "s" on the word "subsection" were deleted. The word "which" was substituted for the word "that" after the word "Part".

the Section 132.40(d) and (d)(2) - The word "after" was substituted for word "of" following the phrase "working days". Sections 132.40(d)(1) and (d)(2)(B) - The word "after" was substituted for the word "of" following the word "months".

Section 132.40(d)(2)(A) - The "s" was deleted from the word "DCFS'".

- The word "after" was substituted for the word "of" following the phrase "working days". Sections 132.55(b)(1), (b)(1)(A), and (b)(2)

Section 132.55(b)(2)(C) - The "s" on the word "Sections" was capitalized.

Section 132.55(b)(8)(B) - The "s" on the word "witness" in the second sentence was deleted. Section 132.55(b)(9) - The phrase "or not" after the word "whether" in the first sentence was deleted. A comma was added after the word "conclusions" in the third sentence.

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Section 132.70(a)(1) - Commas were added after the word "certifications" in the first line and the word "licensure" in the second line.

Section 132.70(b) - The word "the" before the word "development" in the first sentence was deleted. Was "specified" Section 132.80(a) - The word "as" before the word deleted. Section 132.80(b) - In the first sentence the phrase "to the Department or DCFS" was moved from following the phrase "fiscal year" to be placed after the word "submit". In the fourth sentence the word "in" was substituted for the word "and" before the word "fund". sentence, the comma after the word "reason" was deleted. Section 132.80(f)(2) - The word "after" was substituted for the word "of" following the word "months".

Section 132.85(a)(1) - A comma was added after the word "Part".

Section 132.90(b) - The phrase "effective at the time of application" after the word "follows" was deleted.

Section 132.90(b)(2) - The title of the cited Act was corrected to read "The Illinois Plumbing License Law" and the comma before the date was

Section 132.90(c) - The phrase "for purposes of" was added before the phrase "this Section" and the word "for" was deleted before the word 'providers" in the first sentence.

Section 132.100 - A comma was added after the word "to".

Section 132.115(c) - The word "follows" was substituted for the word "following".

"of" Section 132.115(e) - The word "after" was substituted for the word following the phrase "12 months" in the first sentence.

comma - The word "and" was substituted for the following the word "services" in the second sentence. Section 132.120(a)

Section 132.120(c) - The word "after" was substituted for the word "of" following the word "days".

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Section 132.120(f)(9) - A comma was substituted for the phrase "and the" after the word "employment" and the word "and" was added after the word

Sections 132.120(h) and 132.150(c)(7) - The first sentence was rewritten to read: "Responsibility for the completed mental health assessment shall be conducted by a QMHP who has had, at a minimum, one face-to-face contact with the client, his or her family, and the client's guardian, if applicable, at the client's request or by agreement of the client, during family was given the opportunity to provide pertinent information or support.

the Section 132,120(i) - The comma following the word "psychologist" in fourth sentence was deleted.

"of" Section 132.125(c) - The word "after" was substituted for the word following the word "days".

Section 132.125(g) - The word "but" was added after the word "necessary"; a comma was deleted after the word "semi-annually".

Section 132.130(b)(4)(B) - A comma was substituted for the word "and" after the word "effects" and the word "and" was added before the word

Section 132.130(e)(1) - Rewritten to read: "Service eligibility and termination criteria shall include a determination that the client's role functioning is 70 or below, when not in crisis, as assessed using the GAF or CGAS scales (see Section 132.135(b)(1)).

Section 132.135(a)(1) - A comma after the word "immediate" was deleted.

- The word "and" after the word "days" was Section 132.135(b)(1)(A) deleted. "professionals" was comma after the word ¥ -Section 132.135(c)(1) deleted. comma was added before the phrase ¥ -Section 132.135(c)(3) minimum". added

Was

to"

- The phrase "and

word the before was added Sections 132.140(a)(5) and 132.150(g)(5) before the word "facilitate". comma Section 132.140(b)(1)(A) - A of The hospitalization of the last line. 132.140(b)(1)(A)

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- The word "a" was added before the Section 132.140(b)(2) and 132.160(d) word "determination"

the word Section 132.140(b)(2)(B) - A comma was added after the word "adjustment". added after Was comma ¥ ı Section 132.140(b)(3)(B(11) functioning".

Section 132.145(a)(1)(E) - A comma after the word "or" was deleted.

Section 132.150(c)(1) - The word "and" was substituted for the after the word "services" in the third sentence.

word the The word "after" was substituted for Section 132.150(c)(3) - The word "a! "of" after the phrase "working days". Section 132.150(c)(6)(1) - A comma was substituted for the word "and" after the word "employment" and the word "and" was added after the word

Section 132.150(c)(9) - The word "determine" was substituted for the Was # Z3 phrase "make a determination" in the second sentence. The word added before the phrase "face-to-face in the last sentence. word the - The word "after" was substituted for Section 132.150(d)(3) - Thornoof in the first sentence. Section 132.150(e)(1)(D)(41) - A comma was substituted for the word "and" after the word "effects" and the word "and" was added before the word

Section 132.150(e)(1)(G) - A comma after the word "MHP" was deleted.

word the - The word "have" was substituted for Section 132.150(e)(4) - The word "have" wa "has" before the words "improved" and "been".

Section 132.150(f) - A comma after the word "immediate" was deleted.

"days" was word "and" after the word - The Section 132.150(f)(6)(A)(1) deleted. ď the phrase before added was comma -Ч Section 132.150(f)(8) minimum".

Section 132.150(g)(6) - The letter "s" was added to the word "ITP".

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Sections 132.150(g)(8)(B), (h)(3) and (h)(4) - The word "a" was added before the word "determination."

Section 132.150(g)(8)(D)(11) - A comma was added after the word "functioning".

Section 132.150(h) - The heading was changed to read "Individual/family social relationships".

Sections 132.155(a)(1)(A) and 132.170(a)(1)(A) - A comma was substituted for the word "or" after the words "care", "relationships" and "behavior" and a comma was added after the phrase "work adjustment",

Section 132.155(a)(2) - The word "another" was substituted for the word "other" before the word "child".

Sections 132.155(c) and 132.155(d)(3) - The word "after" was substituted for the word "of" following the word "days".

Section 132.155(c)(7) - Rewritten.

Section 132.155(d)(2) - A comma was substituted for the semicolon following the word "contracts".

Sections 132.155(g)(2)(B), (3)(B); and (h)(2)(E) - The end comma was deleted.

Section 132,160(b)(4) - A comma was added after the word "availability".

Section 132.170(a) - The letter "s" was deleted from the word "require".

Section 132.170(c)(1) - The word "participation" was substituted for the word "participate".

Section 132.170(c)(2) - A comma was added after the phrase "eligible client".

Section 132.170(d)(2)(C) - The end comma was deleted.

Section 132.Appendix B, Table A - In the second category, second column, the phrase "one assessment" was added.

Section 132.Appendix B, Table B - In the sixth category, first column, the word "or" after the word "administration" was deleted. In the seventh category, first column, the phrase "or assessment" was deleted. In the 11th category, the duplicate word "rehabilitation" and the word "training" were deleted.

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Section 132.Appendix B, Table C - In the 11th category, third column, "40 hours" was added. In the 12th category, third column, "40 hours" was added.

Other changes which were made were to changes made during the second notice period.

- 12) Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? Yes, all changes have been made.
- 13) Will these rules replace an emergency rule? Yes, these rules replace the Department's emergency rules adopted at 16 Ill. Reg. 211 (January 3, 1992) effective December 31, 1991.
- 14) Are there any amendments pending on this Part? N
- 15) Summary and Purpose of Rules:

These rules allow the Department of Mental Health and Developmental Disabilities and the Department of Children and Family Services (DCFS) to expand the type and availability of medically-necessary mental health services and increase the number of providers participating in a voluntary program.

Specifically these rules allow agencies to participate under one or more of the Medicaid options (i.e., clinic, rehabilitative and case management); provide off-site rehabilitative services; provide case management services; and permit differing qualified levels of staff to participate in the provision of services. In addition, these rules further enhance DCFS' capabilities to comply with the terms of a consent decree regarding timely discharges of children and adolescents from psychiatric institutions.

16) Information and questions regarding these adopted amendments shall be directed to:

Name: Judith Hollenberg
Rules Administrator
Address: 402 Stratton Building
Springfield, IL 62765

Springieiu, 15 0. Telephone: (217)785-3313 The full text of the Adopted Rules begins on the next page:

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DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

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TITLE 59: MENTAL HEALTH CHAPTER I: DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

MEDICAID COMMUNITY MENTAL HEALTH SERVICES PROGRAM PART 132

SUBPART A: GENERAL PROVISIONS

Certification for additional Medicald community mental SUBPART B: PROVIDER ADMINISTRATIVE REQUIREMENTS Personnel and administrative recordkeeping Certification appeal criteria and process Application and certification process Clients' rights and confidentiality health services and/or new site(s) Suspension of certification Termination of certification Recertification and reviews Incorporation by reference Organizational structure Rate setting Definitions Section 132.45 132.50 132.55 132.55 132.65 132.70 132.75 132.80 132.85 132,10 132.15 132.20 132.25 132.30 132.35 132.40

Fiscal and statistical Program evaluation

Utilization review	Clinical records	Continuity and coordination of services	Availability of services
132.95	132.100	132.105	132.110
		0	

SUBPART C: UTILIZATION REVIEW AND CONTINUITY OF SERVICES

Provider site(s) Recordkeeping

132.90

SUBPART D: CLINIC SERVICES

132.115	Provisions		
132.120	Service needs evaluation		
132,125	Treatment plan development	and	and modification
132.130	Psychiatric treatment		•
132.135	Crisis intervention		

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SUBPART E: REHABILITATIVE SERVICES

		reunification
	. health services	stabilization and
Provisions	Rehabilitative mental health services	Family intervention, stabilization and reunification
132.145	132.150	132.155

services

SUBPART F: CASE MANAGEMENT SERVICES

132.160 132.155 132.170 132.APPI 132.APPI TABLI TABLI	Provi Menta Rehab ENDIX A ENDIX B	132.160 Provisions 132.165 Mental health case management services 132.170 Rehabilitative case management 132.APPENDIX A Medicaid Community Mental Health Services Application 132.APPENDIX B Utilization Parameters TABLE A Mental Health Clinic Program Client Services TABLE B Rehabilitative Mental Health Services
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AUTHORITY: Implementing and authorized by the Community Services Act (111. Rev. Stat. 1991, ch. 91½, pars. 901 et seq.) and Section 15.3 of the Department of Mental Health and Developmental Disabilities Act (111. Rev. Stat. 1991, ch. 911, par. 100-15.3). SOURCE: Emergency rules adopted at 16 Ill. Reg. 211, effective December 31, 1991 for a maximum of 150 days; new rules adopted at 16 Ill. Reg. 9006 ... May 29, effective___

GENERAL PROVISIONS SUBPART A:

Section 132.10 Purpose

participation by providers who voluntarily elect to participate in the Medicaid community mental health program. The Medicaid community mental health program shall include the provision of specific mental health services pursuant to Subparts D, E and F of this Part supported financially in whole or in part by the Department of Mental Health and Developmental Disabilities, the Department of Children and Family Services (DCFS) and by Medicaid (42 U.S.C.A. 1396 et seq., 1991) for grants to states for medical assistance eligible clients, under the Illinois medical assistance program (89 Ill. Adm. Code 140) (Medical Payment) administered by The requirements set forth in this Part establish criteria for the Department of Public Aid. a)

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- b) These requirements are for the purpose of assuring that clients receiving Medicaid community mental health services shall receive quality services in accordance with this Part and in accordance with 42 CFR 440 and 456, 1989 for Medicaid-eligible clients.
- c) The Department and DGFS shall use these requirements to certify, recertify, and periodically review providers participating in the Medicaid community mental health program including the certification and recertification of the provider's eligibility for approval and enrollment in the Illinois medical assistance program by the Department of Public Aid (89 III. Adm. Code 140) (Medical Payment).
- d) The Medicaid community mental health program shall include assessment, treatment, and rehabilitative services for clients who require mental health services as indicated by a diagnosis contained in the International Classification of Diseases, Clinical Modification, Ninth Revision (ICD-9-CM) (Commission on Professional and Hospital Activities, Edwards Brothers, Ann Arbor, Michigan 48106, 1979). This shall include services designed to benefit clients:
- With current symptoms of mental illness who require an assessment to determine the need for mental health treatment and/or rehabilitation; or
- Who are assessed to require medically necessary mental health treatment and/or rehabilitative services, to promote growth and/or maintenance of age appropriate or independent role functioning; or
- 3) Who are experiencing a substantial change/deterioration in age appropriate or independent role functioning, a high level of personal distress, and who require crisis intervention services to achieve stabilization; or
- 4) Who, because of substantial impairment in role functioning, require multiple coordinated rehabilitative services delivered in a variety of settings, on an emergency or non-emergency basis.
- e) A provider certified under 59 III. Adm. Code 130 prior to January 1, 1992, is deemed to be certified under this Part. Certification for those services beyond those enrolled under 59 III. Adm. Code 130 requires a written request to the Department from the provider with detailed program description(s), including staff qualifications, for each new additional service to be provided.

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Section 132.15 Incorporation by reference

Any rules or standards of an agency of the United States or of a nationally-recognized organization or association that are incorporated by reference in this Part are incorporated as of the date specified and do not include any later amendments or editions.

Section 132.20 Clients' rights and confidentiality

To assure that clients' rights are protected and that all services provided to clients comply with the law, providers shall ensure that:

- a) The clients' rights shall be protected in accordance with Chapter 2 of the Mental Health and Developmental Disabilities Gode (III. Rev. Stat. 1991, ch. 91 1/2, par. 2-100 et seq.).
- b) The right of clients to confidentiality shall be governed by the Mental Health and Developmental Disabilities Confidentiality Act (III. Rev. Stat. 1991, ch. 91 1/2, par. 801 et seq.).
- c) Staff shall inform clients receiving services of the following:
- Their rights in accordance with subsections (a) and (b) above and;
- 2) Their right to contact the Guardianship and Advocacy Commission, Protection and Advocacy, Inc., and the Department or DCFS, as appropriate. Staff shall offer assistance to clients in contacting these groups giving each client the address and telephone number of the Guardianship and Advocacy Commission and Protection and Advocacy, Inc.
- d) The information in subsection (c) above shall be explained using language or a method of communication that the clients understand and documentation of such explanation shall be placed in their clinical records.
- e) Justification for restriction of client rights under the statutes cited in subsections (a) and (b) shall be documented in the client's clinical record. In addition, the client affected by such restriction, his or her parent or guardian and any agency designated by the client pursuant to subsection (c)(2) above shall be notified of the restriction.
- f) Every client shall be free from abuse and neglect.

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- when such decisions are reviewable by the provider's governing board, in which case the governing board's decision is final) and shall be subject to review in accordance with the Administrative Clients or guardians shall be permitted to present grievances and to appeal adverse decisions of the provider up to and including the grievance shall constitute a final administrative decision (except Review Law (Ill. Rev. Stat. 1991, ch. 110, par. 3-101 et seq.). executive director. The executive director's decision on
- Clients shall not be denied, suspended or terminated from services or have services reduced for exercising any of their rights. þ

Section 132.25 Definitions

For the purposes of this Part, the following terms are defined:

interventions." Interventions with an individual or a group of individuals directed toward independent or age-appropriate developmental and stabilization functioning and emotional stability. functioning, "Adaptive

"Adult." An individual who is 18 years of age or older or a person who is emancipated pursuant to the Emancipation of Mature Minors Act (Ill. Rev. Stat. 1991, ch. 40, par. 2201, et seq.).

"CGAS." The Children's Global Assessment Scale as published in the Archives of General Psychiatry, Volume 40, November 1983, pp. 1228-1231.

Department of Public Aid as a Medicaid provider in order to provide Medicaid reimbursable mental health services. Enrollment as a Medicaid provider is issued by the Department of Public Aid on eligibility of a provider to participate in the Medicaid community "Certification." Initial determination and redetermination of the determination of compliance with this Part. Certification must be issued by the Department or DCFS prior to enrollment with the receipt of a letter of certification by the Department or DCFS and on determination of compliance with 89 Ill. Adm. Code 140.11 by the is issued by the Department or DCFS upon a mental health program and to provide mental health services. Department of Public Aid. Certification

years of age or younger. For DCFS, an individual who is 17 years of age or younger, except for an individual 18 years of age, but less than 21 years old, who was receiving child welfare services "Child or adolescent." For the Department, an individual who is 17

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from DCFS prior to his or her 18th birthday and continues to receive such services following his or her 18th birthday.

Medicaid community mental health program services financially supported in whole or in part by the Department (III. Rev. Stat. 1991, ch. 91%, par. 1-123), or DCFS. "Client." An individual who is Medicaid-eligible and is receiving

professional communication between the provider and staff of other agencies or with others (including family members) who are involved with providing services to a client with a mental illness, for the purpose of implementing or evaluating the treatment plan. Individual consultation." "Client-centered

The Mental Health and Developmental Disabilitles Code (Ill. Rev. Stat. 1991, ch. 91%, par. 1-100, et seq.). "Code."

rehabilitative mental health services for adults with serious mental illness and impaired role functioning which focuses on maintenance of community stability, client choice in the array of services and promotion of increased independence. These services are restricted to services licensed under 59 Ill. Adm. Code 115 (Standards and Licensure Requirements for Community-Integrated inclusive An rehabilitation." Living Arrangements). "Community-based

Developmental Disabilities Confidentiality Act (Ill. Rev. Stat. 1991, ch. 91%, The Mental Health and "Confidentiality Act." par. 801 et seq.).

the goal of symptom reduction, stabilization and restoration to a experiencing a psychiatric crisis which are designed to interrupt a services to avoid more restrictive levels of treatment, which has crisis experience including assessment, brief supportive therapy or "Crisis intervention." Activities or services to persons who are counseling and referral and linkage to appropriate previous level of functioning.

"Day." A calendar day unless otherwise indicated.

mental health services provided to persons with mental illness to promote improvement in psychological, interpersonal, and age-appropriate or independent role functioning which shall include intensive stabilization, extended treatment and rehabilitation and psychosocial rehabilitation. Three levels of rehabilitative within a format of structured daily activities which are designed rehabilitation program."

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of Mental Health and The Illinois Department Developmental Disabilities. "Department."

the Abused and Neglected Child Reporting Act (III. Rev. Stat. 1991, ch. 23, par. 2051 et seq.), the Children and Family Services Act (III. Rev. Stat. 1991, ch. 23, par. 5005 et seq.) or the Juvenile Court Act of 1987 (III. Rev. Stat. 1991, ch. 37, par. 801-1 et maximum level of functioning for clients served by DCFS pursuant to 'Developmental rehabilitative services." Specialized interventions in accordance with Section 132.155 using drama, art, music or recreation which are intended to result in the restoration to a seq.) for whom a recommendation for such services has been made by a physician or licensed practitioner of the healing arts.

'Director." The Director of the Department.

'DSM-III-R." The Diagnostic and Statistical Manual of Mental Disorders, Third Edition revised (American Psychlatric Association, "Enrollment." The official enrollment of a certifled provider in the medical assistance program by the Department of Public Aid on determination of compliance with 89 III. Adm. Code 140.11.

health services provided to persons with mental illness within a format of structured daily programming designed to promote growth role "Extended treatment and rehabilitation." Rehabilitative mental maintenance of age appropriate and independent functioning. "Family." A basic unit or constellation of one or more adults and/or children, foster or adoptive parents and children, and private individual guardian(s).

mental health staff meets with the client with a mental illness and his or her available family members in ongoing periodic formal sessions to deal with daily living issues associated with the client's emotional, cognitive or behavioral problems, which are counseling approach uses a variety of supportive and re-educative "Family counseling." A treatment approach in which one or more significantly impacted on by current family interactions. techniques. "Family therapy." A treatment approach in which one or more professionals deliberately establish a relationship with a client with a mental illness and his or her immediate family in ongoing

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to be substantially due to impaired relations within the family. The goal is to modify family relationships, which will result in amelioration or reduction of the client's symptoms of emotional, periodic formal sessions, when the client's problems are perceived cognitive or behavioral disorder.

'GAF." The Global Assessment of Functioning Scale contained in the DSM-III-R.

mental health staff meets with two or more clients with a mental illness in ongoing periodic formal sessions to deal with daily living issues associated with their emotional, cognitive or counseling." A treatment approach in which one or more behavioral problems using a variety of supportive and re-educative techniques. "Group

formal sessions with the goal of ameliorating or reducing the symptoms of emotional cognitive or behavioral disorder and professionals deliberately establish a relationship with two or more clients with a mental illness seen simultaneously in periodic "Group therapy." An approach to treatment in which one or more behavioral and cognitive, positive emotional, development. promoting

person of a child appointed by an Illinois juvenile court or a legally-appointed guardian or custodian or other party granted legal care, custody and control over a minor child by a juvenile court of competent jurisdiction located in another state whose jurisdiction has been extended into Illinois via the child's 110%, par. 1-1 et seq.) or a temporary custodian or guardian of the legally authorized placement in accordance with the applicable 'Guardian." The court-appointed guardian or conservator of the interstate compact. (The Juvenile Court Act of 1987; Interstate person under the Probate Act of 1975 (III. Rev. Stat. 1991, .ch. Compact on the Placement of Children (Ill. Rev. Stat. 1991, ch. 23, par. 2601 et seq.))

health staff person meets with one client with a mental illness in ongoing periodic formal sessions, and uses relationship skills to promote the client's ability to deal with daily living issues "Individual counseling." A treatment approach in which one mental associated with his or her emotional, cognitive or behavioral

provided individually or in a group setting to an individual with a mental illness or to his or her family in goal directed sessions "Individual/family social rehabilitation." Structured activities

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interpersonal or community adaptive functioning, which are based on a clearly defined format which specifies the expected outcome. The cognitive, rehabilitation emotional, psychosocial of social, programming as defined in this Section. from improvement distinct toward

deliberately establishes a relationship with an individual client with a mental illness in ongoing periodic formal sessions with the "Individual therapy." A treatment approach in which a professional goal of ameliorating or reducing the symptoms of emotional, cognitive or behavioral disorder and promoting positive emotional, cognitive and behavioral development.

applicable, the client's guardian, which specifies the client's diagnosis, problems, and service needs to be addressed, the intermediate objectives and long-term goals for the services and document developed by the appropriate service provider staff with Individual treatment plan" or "treatment plan" (ITP). A written the participation of the client with a mental illness and, if the planned interventions for achieving these goals.

comprehensive psychosocial rehabilitation and training service provided in the home, school or other community-based location to impairment in role functioning to reduce the risk of more children and adolescents with a mental illness and substantial 'Intensive family-based services for children and adolescents." restrictive treatment such as psychiatric hospitalization. "Intensive stabilization day program." Rehabilitative mental health services provided to persons with mental illness within a format of structured daily programming designed to promote crisis resolution and/or stabilization.

including: vocational/educational productivity, independent living adolescents, these areas include family/home, school and community. Scales approved for use with children and adolescents include, but are not limited to, the GAF Scale or the CGAS Scale. 'Level of role functioning." For adults, refers to the client's level of functioning in everyday life in three critical areas and self-care, and social network relationships. Scales approved for use with adults include the GAF Scale. For children and

(III. Rev. Stat. 1991, ch. 111, par. 5351 et seq.) or a licensed clinical social worker (LCSW) licensed under The Clinical Social "Licensed practitioner of the healing arts (LPHA)." A clinical psychologist licensed under the Clinical Psychologist Licensing Act

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Work and Social Work Practice Act (Ill. Rev. Stat. 1991, ch. 111, par. 6351 et seq.).

Security Act (42 U.S.C.A. 1396 et seq., 1991), for eligible recipients including Aid to the Aged, Blind and Disabled (AABD), Aid to Families with Dependent Children (AFDC), Medical Assistance No Grant (MANG), Refugee Repatriate Program (RRP) recipients as well as Title XIX eligible DCFS wards. "Medicaid." Medical assistance issued by the Illinois Department of Public Aid under the provisions of Title XIX of the Social

Security Act case management services that the Department of Public Aid includes in the Medicaid state plan as covered services for "Medicaid case management." Refers to the Title XIX of the Social Medicaid-eligible clients and as defined in Subpart F of this Part. "Medicaid clinic option (MCO)." Refers to clinical services, as authorized in 42 CFR 440.90, 1989, and defined in Subpart D of this Part, that at the option of the State may be included in the Medicaid state plan as covered services for Medicaid clients.

agreement with either the Department or DCFS. These services are supported financially in whole or in part by the Department or DCFS (89 III. Adm. Code 140) for eligible clients. Providers must be certified by the Department or DCFS and also be enrolled with and which are provided by a certified provider under a contractual and are also included under the Illinois medical assistance program be approved by the Department of Public Aid as a Medicaid provider. treatment and/or rehabilitative services as defined in this Part "Medicaid community mental health services program."

defined in Subpart E of this Part, that at the option of the Department of Public Aid may be included in the Medicaid state plan rehabilitative services, as authorized in 42 CFR 440.130, 1989, Refers option." as covered services for Medicaid-eligible clients. services rehabilitative "Medicaid

"Mental health assessment." The formal process of gathering into a written report(s) demographic data, presenting problems, history or cause of illness, history of treatment, psychosocial history and current functioning in emotional, cognitive, social and behavioral domains through a face-to-face or personal contact with the client and collaterals, which resuits in identifying the client's mental health service needs, and recommendations for service delivery, and may include a tentative diagnosis.

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linkage, support and advocacy for persons with mental who need multiple services and require assistance in health case management." Case management services to access to and in using mental health, health, social, ocational, educational and other community services and resources. gaining illness provide

bachelor's degree, a practical nurse license pursuant to the Illinois Nursing Act of 1987 (Ill. Rev. Stat. 1991, ch. 111, par. 3501 et seq.) or have a minimum of five years supervised experience "Mental health professional (MHP)." A mental health professional (MHP) provides services under the supervision of a qualified mental health professional. The mental health professional must possess a in mental health or human services.

diagnosis of mental retardation or psychoactive substance use "Mental illness." A mental or emotional disorder verified by a diagnosis contained in the DSM-III-R or ICD-9-CM which substantially impairs the person's cognitive, emotional and/or behavioral functioning; excluding V codes, organic disorders such dementia and those associated with known or unknown physical conditions such as hallucinosis, amnestic disorder, and delirium; psychoactive substance induced organic mental disorders; and mental retardation or psychoactive substance use disorders. For purposes of this Part, this does not exclude individuals with a dual disorders as long as a mental illness is the principal diagnosis.

treatment or prevention of these disabilities to achieve optimum functioning. Occupational therapy shall be provided in accordance physician as part of the total rehabilitation and health care team. functional performance ability of clients impaired by physical illness or injury, emotional disorder, congenital or developmental disability, or the aging process, and the analysis, selection and with the Illinois Occupational Therapy Practice Act (Ill. Rev. application of occupations or goal-directed activities, for "Occupational therapy." The evaluation, after referral Stat. 1991, ch. 111, par. 3701 et seq.). A physician licensed under the Medical Practice Act of 1987 (III. Rev. Stat. 1991, ch. 111, par. 4400-1 et seq.). "Physician."

Medicaid community mental health program services which must be provided directly by a physician are psychiatric evaluation and psychotropic medication prescription and The services."

diagnosis, the principal diagnosis is the condition that is chiefly When a person receives more than one "Principal diagnosis."

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responsible for precipitating inclusion in the appropriate Medicaid community mental health program services. A principal diagnosis of mental illness is the condition that will be the main focus of attention or treatment.

"Provider." An agency certified by the Department or DGFS to provide Medicald community mental health services in accordance with this Part.

supervision, in treating problems related to mental illness. The psychiatric evaluation covers all aspects of assessment generally including a statement of assets and deficits and results in a accepted as reasonable clinical practice in the field of psychiatry "Psychiatric evaluation." An in-depth evaluation of the client conducted by a psychiatrist, or a physician with training in mental health services or one year of clinical experience, under formulation of problems, diagnosis, and treatment recommendations.

Clinical Psychologist Licensing Act using nationally standardized psychological assessment instruments. The assessment results in a functioning in emotional, cognitive, intellectual and/or behavioral domains by a licensed clinical psychologist consistent with the formulation of problems, tentative diagnosis and recommendation for of An assessment assessment." treatment or service(s). "Psychological

illness to function at their highest level in the community. Clients participate, based on individual needs as determined in their treatment plan, in a variety of integrated individual and group services during the regularly scheduled formal program including counseling and adaptive functioning, stabilization and A formal program of daily services directed towards assisting clients with a mental "Psychosocial rehabilitation day program." developmental interventions.

observation of the client's response to his or her medication and information provided to a client with mental illness regarding the appropriate use of the psychotropic medication prescribed for "Psychotropic medication monitoring and training." or her mental illness.

the οĘ One (QMHP)." mental health professional "Qualified following:

to practice medicine or osteopathy with training in mental health services or one year of clinical experience, under A physician licensed under the Medical Practice Act of 1987

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supervision, in treating problems related to mental illness, or specialized training (the treatment of children and adolescents);

A psychiatrist (a physician licensed under the Medical Practice Act of 1987) who has successfully completed a training program in psychiatry approved by the American Medical Association, the American Osteopathic Association, or other training program identified as equivalent by the Department;

A psychologist licensed under the Clinical Psychologist Licensing Act with specialized training in mental health services:

A social worker possessing a master's or doctoral degree in social work and licensed under The Clinical Social Work and Social Work Practice Act with specialized training in mental health services;

A registered nurse licensed pursuant to The Illinois Nursing Act of 1987 with at least one year of clinical experience in a mental health setting or a master's degree in psychlatric

An occupational therapist registered pursuant to the Illinois Occupational Therapy Practice Act with at least one year of clinical experience in a mental health setting; or

An individual possessing a master's or doctoral degree in counseling and guidance, rehabilitation counseling, social work, vocational counseling, psychology, pastoral counseling, or family therapy, or related field, who has successfully completed a practicum and/or internship which includes a minimum of 1,000 hours, or who has one year of clinical experience under the supervision of a qualified mental health professional; or who is a licensed social worker holding a master's degree with two years of experience in mental health services.

"Rehabilitative assessment". Assessment activities in accordance with Section 132.155 including the use of recognized professional practices and, as necessary, the administration of valid and reliable instruments in order to determine a client's need for rehabilitative services.

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"Rehabilitative crisis intervention and stabilization." Intensive, face-to-face interventions with an eligible client and/or family in accordance with Section 132.155 who is experiencing an acute crisis which are intended to result in the short-term restoration of the client's or family's stability and functioning to the extent that the client is not at risk of self-harm or of removal from his or her family or of psychiatric hospitalization or abuse or neglect and/or the client is not at risk of self-harm or of causing harm to others or property.

"Rehabilitative counseling." Counseling in accordance with Section 132.155 which is intended to result in the behavioral or functional changes necessary to restore an eligible client served by DCFS pursuant to the Abused and Neglected Child Reporting Act, the Children and Family Services Act or the Juvenile Court Act of 1987 who has been determined as the result of a mental health or comprehensive assessment to be in need of rehabilitative counseling, to the level necessary for the client's effective day-to-day functioning.

"Rehabilitative services associate (RSA)." A rehabilitative services associate assists in the provision of services in accordance with Sections 132.155 and 132.170. A rehabilitative services associate must be at least 21 years sold, have demonstrated skills in the field of services to children, have demonstrated the ability to work within agency structure and accept supervision, and have demonstrated the ability to work constructively with clients, other providers and the community.

"Rehabilitative services coordination." Activities in accordance with Section 132.170 intended to directly assist eligible clients served by DCFS pursuant to the Abused and Neglected Child Reporting Act, the Children and Family Services Act or the Juvenile Court Act of 1987 to access rehabilitative services recommended by a physician or LPHA pursuant to the rehabilitative services portion of the treatment plan.

"Rehabilitative services consultation and review." Scheduled meetings with a supervisor, the recommending physician or LPHA or with a team of professionals from multiple disciplines in accordance with Section 132.155 which are for the distinct purpose of reviewing the status of prescribed rehabilitative services and/or determining whether there is a need to change the type or content of a prescribed service for clients served by DCFS pursuant to the Abused and Neglected Child Reporting Act, the Children and Family Services Act or the Juvenile Court Act of 1987.

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"Rehabilitative services plan." A written plan developed in accordance with Section 132.155 which includes identification of the problems to be addressed, the rehabilitative services to be provided and the outcomes to be achieved for eligible clients served by DGFS pursuant to the Abused and Neglected Child Reporting Act, the Children and Family Services Act or the Juvenile Court Act Act 61 1987.

"Rehabilitative stabilization services." Specific activities in accordance with Section 132.155 undertaken with eligible clients served by DCFS pursuant to the Abused and Neglected Child Reporting Act, the Children and Family Services Act or the Juvenile Court Act of 1987 pursuant to a recommendation for rehabilitative stabilization services. The activities, which may be provided innividually or in a group setting, are intended to result in the client developing or maintaining his or her best possible functional level in the areas of family, school or community.

"Rehabilitative transition linkage and aftercare." Activities in accordance with Section 132.170 completed with or on behalf of a child for whom DCFS is legally responsible, who is being moved from one living arrangement to another living arrangement that are intended to result in an effective transition consistent with the child's need for rehabilitative services and his or her welfare and development, including transition to adult systems of care if indicated and appropriate.

"Service needs evaluation." The formal process of determining the service needs of the client through an assessment of the client, utilization of information gained from available collaterals (family and associates), data from the mental health assessment, and specialized intensive assessments required by the nature of the client's condition, such as a psychiatric evaluation, psychological assessment, or other specialized assessment approach.

"Site." A discrete location that is owned or leased by a provider for the purpose of providing Medicaid community mental health services.

"Substantial impairment of role functioning." Refers to significant limitations in activities of daily living, such as self-care, communications, learning, work skills, social interaction, the ability to self-direct one's behavior at an age-appropriate or independent level and, in the case of a child or adolescent, may include the extrusion or risk of extrusion from family due to emotional and behavioral factors.

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Section 132.30 Application and certification process

- a) Any agency having a contract with the Department or DGFS for provision of mental health services, or with DGFS for the provision of child welfare services or youth services may apply for certification as a provider. Successful applicants will be certified by the Department or DGFS and enrolled as a provider in the Illinois medical assistance program by the Department of Public Aid pursuant to 89 Ill. Adm. Code 140.11.
- b) DCFS is authorized to perform the functions ascribed to the Department in this and Sections 132.35 through 132.55, in relation to human service agencies contracting with DCFS as specified in subsection (d) below.
- c) Applications may be obtained by submitting a request in writing to:

Department of Mental Health and Developmental Disabilities Bureau of Certification and Licensure 4201 North Oak Park Avenue Chicago, Illinois 60634

or

Department of Children and Family Services Office of Medicaid Certification 406 East Monroe Street Springfield, Illinois 62701

- d) The applicant shall submit to the Department or DCFS a completed "Application for Certification of Medicaid Community Programs" with all necessary accompanying components in accordance with the following:
- An applicant intending to contract under this Part solely with the Department for children and adolescents and/or adult Medicaid community mental health services shall submit its completed application to the Department; or
- An applicant intending to contract under this Part solely with DCFS for children and adolescents Medicaid community mental health services shall submit its completed application to DCFS; or
- 3) An applicant intending to contract under this Part with both Departments for children and adolescents Medicaid community

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mental health services shall submit its application to either Department; or An applicant intending to contract under this Part with both Departments for children and adolescents Medicaid community mental health services and with the Department for adult Medicaid community mental health services shall submit its completed application to the Department.

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At the discretion of the Department or DCFS, agencies submitting applications which have all components attached may be certified in accordance with the procedures outlined in either subsection (f) or (g) below. ()

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- ordinances and codes relating to fire safety for all site(s) where For applications that have attached to them, at a minimum, a staffing roster, evidence of compliance with state and local Medicald reimbursable services are being provided, documentation of compliance from a licensed plumber and electrician that any structure to be used as a site is in compliance with the codes and standards pertaining to the licensing and regulation of plumbers and the National Electrical Code (see Section 132.90) and a copy of the applicant's financial audit for the last fiscal year if it is on file with the Department or DCFS, the Department or DCFS shall conduct an on-site review within 40 working days of the receipt of the application.
- which the Medicaid community mental health program services The on-site review for full compliance with this Part shall examine all administrative and service standards that pertain to the specific types of Medicaid community mental health for which the applicant is requesting certification. For Section 132.90, the applicant's site(s) on are offered shall be reviewed for compliance with applicable federal, state, and local laws and ordinances pertaining to safety and accessibility. For the program specific Subparts, a review of a sample of Medicaid-eligible client records shall be conducted. Such sample shall consist of a minimum of 10 records from the applicant's Medicaid-eligible clients. In the event that 10 records of Medicaid-eligible clients are available, the sample will consist of all available Medicaid-eligible client records. program services 7
- requirements of this Part, the Department or DCFS shall issue a letter of certification within 20 working days from the completion of the on-site review and send the compliance confirms review on-site date of 5

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Medicaid enrollment forms to the applicant. Certification shall be effective the date of the first day of the on-site review.

- in compliance. The Department or DCFS may certify a provider for participation in the program at the conclusion of the exit conference, if the applicant agrees in writing to correct all other identified deficiencies, and is in compliance with Sections 132.90, 132.115 and/or 132.145. The Department or DCFS shall also issue to the applicant, within 40 working days, a notice of deficiencies enumerating those standards of this Part with which the applicant is not requirements of this Part, the Department or DCFS shall If the on-site review does not confirm compliance with the report deficiencies to the applicant in an exit conference.
- deficiency was first documented. Applicants required to correct deficiencies related to physical accessibility may be certified in the interim upon effecting measures Identify the actions that have been, or will be, taken In order to come into compliance with this Part and the accessibility of the site(s) for persons with disabilities. In such instances, implementation must correction for the deficiencies within 25 working days after the date of the postmark date on the written notice of deficiencies. The plan of correction shall time-frames for implementation of the action. Time-frames for implementation of action shall not exceed three months except when deficiencies relate to physical occur before the end of the next complete state fiscal to reasonably accommodate persons with disabilities. submit a plan following the fiscal year during which deficiencies related to provider shall structural The certified major
- approval of the plan of correction. Providers whose certification is continued based on the Department's or DCFS' approval of their plan of correction shall be The Department or DCFS shall notify the certified provider within 20 working days after receipt and liable for any claims disallowed due to non-compliance

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132.115 and/or 132.145 may be certified when a plan of correction is submitted and approved by the Department Applicants which are not in compliance with Sections or DCFS. Certification will be effective the latest ົວ

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for correcting deficiencies noted in Sections 132.115 and/or 132.145. implementation Jo

- notify the certified provider within 20 working days. The certified provider shall resubmit an acceptable If the plan of correction does not effectively address the action which has been or will be taken to meet the plan of correction within 10 days of the notice or the Department or DCFS shall act to suspend or terminate standards for compliance, the Department or DCFS shall certification. 6
- notice of deficiencies within 25 working days after the postmark date on the notice of deficiencies with a plan of correction, the Department or DCFS shall act to certified provider fails to respond to the suspend or terminate certification. Ξ

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this Part. Applications missing any components will not be accepted as complete and the time-frames of this Section pertaining to applications shall not apply. The applicant shall be notified in writing of missing components within 20 working days after the receipt of the application. The applicant shall submit any missing components within 25 working days after receipt of the written notification. Applications still missing components at this time Applications which have attached to them all components identified in Section 132.Appendix A shall be reviewed for compliance with shall be returned to the applicant.

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- If the application components are in compliance with this Part, the Department or DCFS shall issue a letter of certification within 20 working days after having received the application and send the Medicaid enrollment forms to the provider. The effective date of certification shall be the date the review of the application was completed. 7
- the applicant shall be notified in writing within 20 working days after receipt of the completed application of identified documentation or an acceptable plan of correction for these deficiencies within 25 working days after the postmark date on the notice of deficiencies. The plan of correction shall identify the actions that have been, or will be, taken in If the application includes all of the components but one or this Part, and to come into compliance with this Part of the action. more of the components is not in compliance with shall submit time-frames for implementation applicant The deficiencies. 5

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applicant does not respond with a plan of correction within the 25 working days, the application will be considered withdrawn and returned to the applicant.

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- Upon receipt and approval of the corrected documentation or the plan of correction for the identified deficiencies, the Department or DCFS shall notify the applicant and issue a approved or the plan of correction is implemented except when letter of certification and send the Medicaid enrollment forms to the applicant. The effective date of certification shall be the date on which the corrected documentation is deficiencies relate to major structural deficiencies as explained in subsection (4)(D) below.
- The Department or DCFS shall schedule an on-site review to verify compliance with this Part within six months after initial certification when certification has been issued based solely upon a review of the application components specified in Section 132.Appendix A.
- community mental health program services for which the provider has been certified. The provider's site(s) on which Medicaid community mental health program services ordinances pertaining to safety and accessibility. For the program specific Subparts, a retrospective review be conducted. Such sample shall consist of a minimum of 10 records of the provider's Medicaid-eligible clients. In the event that 10 Medicaid-eligible client records shall examine all administrative and service standards to the specific types of Medicaid are offered shall be reviewed for compliance with are not available, the sample will consist of all The on-site review for verification with this Part of a sample of Medicaid-eligible client records shall laws and local available Medicaid-eligible client records. state, federal, that pertain applicable
- requirements of this Part, the Department or DCFS shall issue a letter of verification within 20 working days If the on-site review verifies compliance with from the date of completing the on-site review. B)
- the requirements of this Part, the Department or DCFS shall report deficiencies to the provider during an exit conference. The Department or DCFS shall also If the on-site review does not verify compliance with issue within 20 working days after the on-site review a ට

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notice of deficiencies to the provider enumerating those standards of this Part with which the provider is not in compliance.

- documented in writing. Providers required to correct deficiencies related to physical accessibility may be certified in the interim upon effecting measures to have been, or will be, taken in order to come into compliance with this Part and the time-frames for implementation of the action. Time-frames for implementation of action shall not exceed three months for the deficiencies within 25 working days after the postmark date on the written notice of deficiencies. The plan of correction shall identify the actions that instances, implementation must occur before the end of fiscal year during which the deficiency was first except when deficiencies relate to major structural deficiencies related to physical accessibility of the The provider is required to submit a plan of correction the next complete state fiscal year following 디 reasonably accommodate persons with disabilities. persons with disabilities. site(s) for 6
- date on the notice of deficiencies with an acceptable deficiencies within 25 working days after the postmark plan of correction, the process to suspend or terminate If the provider fails to respond to the notice of shall be initiated. <u></u>
- within 20 working days after receipt and approval of the plan of correction, shall issue a letter approving continuation of the certification period. Providers certified based on the Department's or DCFS' approval of their plan of correction shall be liable for any Department or DCFS shall notify the provider and, claims disallowed due to non-compliance with this Part. F)
- Accreditation of Healthcare Organizations or the Commission on Accreditation of Rehabilitation Facilities (Standards Manual for Organizations Serving People with Disabilities (Commission on Applicants which are fully accredited by the Joint Commission on Tucson, Arizona 85711, 1989)) or the Council on Accreditation of Services for Families and Children (Provisions for Accreditation) Accreditation of Rehabilitation Facilities, 101 North Wilmot Road, (Council on Accreditation of Services for Families and Children, 1987)) or the Accreditation Council on Services for People with Inc., 520 - 8th Avenue, Suite 2202B, New York, New York 10018,

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Developmental Disabilities) (Accreditation Council for Services for People with Developmental Disabilities, 8100 Professional Place, 111. Adm. Code 2058 (Licensure of Alcoholism and Substance Abuse Treatment, Intervention and Research Programs) shall not have the Suite 204, Landover, Maryland 20785, 1989)) or for applicants licensed by the Department of Alcoholism and Substance Abuse at 77 standards specified in Sections 132.65, 132.70 and 132.75 examined during the on-site review, but are required to comply with all of the standards. These applicants shall not have standards in Section 132.90 examined during the on-site review for any site included in the licensure accreditation process but are required to comply with Developmental Disabilities (Standards for Services for People with all of these standards.

- during the certification period which affect the ability of the provider to deliver services in compliance with the requirements of Initial certification shall be for a 12-month period. Any changes this Part shall be reported to the Department or DCFS. į)
- may appeal the decision and request a hearing in accordance with Section 132.55 and Section 10 of the Illinois Administrative When a decision is made to not certify an applicant, the applicant Procedure Act (Ill. Rev. Stat. 1991, ch. 127, par. 1010). ÷

Recertification and reviews Section 132.35

- certification shall be issued a letter of certification within 20 working days, extending for three years from the date on which the during the certification period which affect the ability of the The Department or DCFS shall conduct a full compliance review at or about 12 months from the date of the initial certification. A provider found in compliance with this Part subsequent to initial prior certification period expired or will expire. Any changes provider to deliver services in compliance with the requirements of this Part shall be reported to the Department or DCFS. a)
- site(s) for persons with disabilities. In such instances, implementation must occur before the end of the next complete state fiscal year following the fiscal year during which the deficiency A provider found not in compliance with this Part shall be issued a notice of deficiencies within 40 working days. The provider shall be required to submit a plan of correction for these deficiencies within 25 working days after the postmark date of the notice of deficiencies. Time-frames for implementation of action shall not exceed three months except when deficiencies relate to major structural deficiencies related to physical accessibility of the was first documented in writing. The Department or DCFS shall issue ф

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a letter of certification upon approving the plan of correction. This certification shall extend for three years from the date on which the prior cértification period expired or will expire.

- A provider which fails to submit a plan of correction or submits a plan of correction that is not approved by the Department or DGFS shall be subject to the suspension and termination provisions in Sections 132.45 and 132.50. <u>်</u>
- A focused review shall be conducted to verify the implementation of a plan of correction; to inspect new services and/or sites for which a provider seeks additional certification; to investigate complaints; and/or to review major program changes related to the ability of the provider to deliver services in compliance with this Part. A focused review shall include an on-site survey when visual inspection is necessary. ਰੇ
- If a recertified provider has a plan of correction on file with the Department or DCFS, a focused review shall be conducted within 12 e
- If the Department or DCFS fails to conduct a compliance review for recertification before the expiration of the current certification period, the certification shall remain valid until completion of such compliance review. (j
- Subsequent compliance reviews for recertification will be conducted on or about the expiration date of the current certification period. 8
- compliance survey, focused review(s) and three-year full compliance sites. Client records and all other records shall be made available to the Department or DCFS, on request, during the initial The Department or DCFS shall be granted access to all provider survey(s) required by this Section, in accordance with Confidentiality Act.

Certification for additional Medicaid community mental health services and/or new site(s) Section 132.40

- services pursuant to this Part that seek certification for the provision of additional Medicaid community mental health services Providers certified for specific Medicaid community mental health shall submit the following documentation: a)
- how the new service(s) is to be provided, when and where the A detailed program description of the service(s) delineating 1

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the provide service(s) is to be provided and who will service(s), including staff qualifications; and

- statements from a licensed plumber and licensed electrician stating that the site(s) meets required local codes for their If the service is to be provided at a site which has not already been certified, a clearance letter from the local fire authority or the Office of the State Fire Marshal and respective professions, and a letter from the provider attesting to compliance with the requirements of physical from a local building inspector will meet the plumber and accessibility standards (see Section 132.90). electrician requirements.) 5
- services pursuant to this Part that seek certification for new site(s) shall comply with the documentation requirements specified in subsection (a)(2) above. Providers certified for specific Medicaid community mental health (q
- The provider's request to certify additional Medicaid community mental health services or new site(s) shall be submitted to the Department to which the original application was submitted. ်
- The documentation listed in subsection (a)(1) and/or (2) above will be reviewed for compliance within 20 working days after receipt. Ŧ
- additional Medicald community mental health service(s) or new site(s) certified. The Department or DCFS shall conduct a focused review within 18 months or at the next scheduled site(s), the provider shall be notified and a new Medicaid If the review determines that the provider is in compliance with the requirements for certification for an additional community mental health service(s) and/or new certificate issued with the same expiration date as the review, whichever comes first, to verify compliance with the requirements for new services only. The Department or DCFS shall conduct a focused review within 12 months after the Department's or DCFS' approval of the new site(s) whichever comes first, to verify compliance with the requirements for current certificate. The certificate shall identify new site(s) only or both new site(s) and new services. Medicaid 1
- notified of the deficiencies in writing within 20 working additional service(s) or new site(s), the provider shall be days after receipt of the documentation as identified in compliance with the requirements for certification If the review determines that the provider is 5

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subsection (a)(1) and/or (2) above. The provider shall submit an acceptable plan of correction for these deficiencies within 25 working days after the postmark date on the notice of deficiencies.

- and a new Medicaid certificate issued with the same certificate shall identify the additional Medicaid Upon the Department's or DCFS' receipt and approval of a plan of correction, the provider shall be notified community mental health service(s) and/or new site(s). the current certificate. expiration date as (A
- new The Department or DCFS shall conduct a focused review to verify implementation of the plan of correction for new site(s) at the next scheduled review or within six months after the Department's or DCFS' approval of the new sites, whichever comes first. The Department or DCFS shall conduct a focused review to verify the services at the next scheduled review or within 18 months of the Department's or DCFS' approval of the new implementation of the plan of correction for services, whichever comes first. B

Section 132.45 Suspension of certification

- certification period shall result in the certified provider being suspended from participation in the Medicaid community mental Failure to comply with the requirements of this Part during a health services program. a)
- The Department or DCFS shall issue a written warning and a correction order to a certified provider which has failed to comply with this Part. The following shall occur as a result of such suspension: Q
- The provider shall have a maximum of 60 working days from the postmark date of the written notice to correct the cited 1
- If the provider does not correct the cited deficiencies within 60 working days, the Department or DCFS shall refer the matter to the Department of Public Aid for action to correct the cited deficiencies assistance program pursuant to 89 Ill. Adm. Code 140.16. i provider's participation terminate the 5
- of claims submitted from the date of the final administrative decision A provider shall be liable for reimbursement 3

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aп pursuant to Section 132.55 if such decision results in adverse finding for the provider.

- be stayed pending an suspend a immediately shall not provider, and such suspension Department or DCFS will appeal, if it determines: ၂
- each in specified as services, Subpart, is not being provided; or of supervision Clinical 7
- The provider's staff is inflicting physical or mental injury or sexual assault on the clients; or 5
- immediate danger to clients, such as a gas leakage in the heating system provided heating system. 3
- determines that the cited deficiencies have been corrected or until action pursuant to subsections (b)(1) and (b)(2) above is taken. Ŧ
 - of any action taken pursuant to this Section and further shall refer any evidence of Medicaid fraud within 10 working days to the The Department or DCFS shall notify the Department of Public Aid Department of Public Aid for further action. ()

Termination of certification Section 132.50

- terminating notice A provider shall be issued a written n certification during a certification period for: a)
- Meeting any of the grounds for termination set forth in 89 Ill. Adm. Code 140.16; or 7
- health services for which the provider has been certified; or community mental of all Medicaid Discontinuing delivery 5
- Being convicted of defrauding the medical assistance program under Article VIII A of the Illinois Public Aid Code (Ill. Rev. Stat. 1991, ch. 23, par. 8A-1 et seq.); or 3
- Failing to submit and/or implement a plan of correction for cited deficiencies. 7
- Department for provision of services under this Part, or the provider and DCFS for the provision of services under this Part, is In the event that the contract between the provider and **Q**

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terminated, certification of the provider shall likewise be terminated and the Department of Public Aid will be advised of this by the Department or DCFS. The provider is solely liable for the cost of services provided after the contract has been terminated.

Section 132.55 Certification appeal criteria and process

- a) Grounds for appeal by the provider are:
- 1) Determination of non-compliance with this Part; or
- 2) Refusal to issue certification; or
- 3) Refusal to issue recertification; or
- 4) Suspension or termination of any or all Medicaid community mental health services.
- b) Certification appeal criteria and process
- If either the Department or DCFS determines that certification or the recertification should not be issued or that certification should be suspended or terminated during a certification period because of non-compliance with the provisions of this Part, either the Department or DCFS shall send, by registered mail, written notice to the applicant or the certified provider within 30 working days after the determination. The notice shall contain the specific requirements the provider has not complied with and either the Department's or DCFS' proposed action as follows:
- A) If the applicant or certified provider chooses to appeal either the Department's or DCFS' decision, the applicant or provider shall submit a written request for a hearing to the Department or DCFS within 20 working days after the date of receipt of the notice.
- B) If an appeal is initiated by a certified provider, services shall be continued pending a final administrative decision.
- If the applicant or certified provider does not submit a request for a hearing, as provided in this Part or if after conducting the hearing either the Department or DCFS determines that the certification or recertification should not be issued or that the certification should be suspended or terminated, either

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the Department or DGFS shall issue an order to that effect. If the order is to suspend or terminate the certification, it shall specify that the order takes effect upon receipt by the certified provider, and that the provider shall not provide Medicald community mental health program services during the pendency of any proceeding for judicial review of the Department's or DGFS' decision, except by court order.

The Department or DCFS shall schedule a hearing within 20 working days after receipt of the request for appeal. The applicant or the provider and the applicant's or provider's representative, hereinafter referred to as the appellant, shall be notified by registered mail at least 10 working days before the hearing. The notice of hearing shall include:

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- A) The date, time, and place of the hearing:
- The legal authority to hold the hearing;

B)

- C) The reference to the particular Sections of the statutes or rules involved; and
- A short statement of the matters asserted.
- Each hearing shall be conducted at a time, date and place reasonably convenient to the appellant.
- 4) The hearing shall be conducted by an impartial hearing officer authorized by either the Department Director or DCFS Director to conduct such hearings. The officer shall not have participated in the decision under appeal.
- 5) The hearing officer, at his or her sole discretion, may grant continuances of the hearing, not to exceed two, at the request of either the appellant or the Department or DCFS.
- The Department or DCFS shall tape record the hearing. A copy of the recording shall be given to the appellant if the appellant so requests no later than five working days after the hearing officer makes his or her decision. The appellant must request a copy of the recording no later than 72 hours after receipt of the decision, if a copy is so desired. The Department or DCFS shall charge the appellant for the cost of

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The Department or DCFS shall have the such evidence as a reasonable person can accept as adequate to support a conclusion. The Department or DCFS shall present its evidence first, then the appellant shall present evidence. The appellant may be represented by the person of burden of proving that there was substantial evidence of non-compliance with these standards. Substantial evidence is At the hearing both parties may present written and oral his or her choice.

Evidence 8

- evidence or procedure, but shall conduct the proceedings in a manner that ensures both parties are allowed to present their evidence and arguments fully The hearing officer shall not be bound by the rules of and freely. ¥
- questions of any other party or witness. Questions other party or witness, and the hearing officer may ask impeaching the witness' character or credentials shall Any party or representative may ask questions of any be improper. â
- the hearing in making his or her decision as to whether either the Department or DCFS sustained its burden of proof. The hearing officer shall uphold, reverse or modify either the Department's or DCFS' decision or determine that either Within five submit his or her written decision, which shall include a statement of facts concerning the appeal and conclusions, to be sent to the appellant at the same time it is submitted to The hearing officer shall only consider evidence presented at working days after the hearing, the hearing officer shall either the Department or DCFS. A copy of the decision shall or DCFS lacks jurisdiction. either the Department or DCFS. the Department 6
- In the event the appellant does not appear at the hearing, the appeal shall be deemed abandoned and shall be dismissed The hearing officer shall send written notice of the dismissal to the appellant. the hearing officer. рд 10
- If the appellant is not satisfied with the hearing officer's decision, the appellant may request a review of the decision by either the Department or DCFS Director or designee. The request must be made in writing to either the Department or DCFS Director or designee no later than 10 working days after 1

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The request shall briefly state the appellant's objections to the decision. receipt of the hearing officer's decision.

- The record shall include those items required by Section 11 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1991, ch. 127, par. 1011). 12)
- and the bases for the decision. Either the Department or DCFS Director or designee shall issue a written decision within 20 working days after receipt of the request for Upon receipt of the request for review, either the Department or DCFS Director or designee shall review the hearing DCFS Director or designee shall issue a written decision upholding, reversing, modifying or remanding the hearing officer's decision and setting forth the facts of the appeal Department or DCFS Director shall uphold the decision if he consideration of all the evidence, either the Department or review, and copies shall be sent to the appellant. Either the or she determines that the procedures set out in this Section were properly followed and that the decision was supported by Director's or designee's decision shall constitute a final officer's decision and the record of the hearing. the Department Either administrative decision. evidence. substantial 13)
- review exclusively as provided in the Administrative Review Law (Ill. Rev. Stat. 1991, ch. 110, par. 3-101 et seq.). Final administrative decisions shall be subject to judicial 14)

Section 132.60 Rate setting

- The Department and/or DCFS will compute rates for services which are reimbursed under the Medicaid community mental health services effective 30 days after approval is received from nt of Public Aid. The rates shall be in effect for The rates will be computed for each state fiscal Department of Public Aid. state fiscal year. a)
- services units designated as fractions or multiples of service Reimbursement rates will be the product of hourly payment rates and hours as indicated in Section 132.Appendix B. (a
- Hourly payment rates for each Medicaid community mental health service are computed from the following factors: ច
- Hourly wages and salaries for direct care staff (QMHP; MHP; and RSA) who are authorized to provide billable services; 7

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- Hourly paid benefits for direct care staff;
- Hourly Medicald-reimbursable community provider operating expenses other than direct care staff salaries, wages, and paid benefits;
- 4) Time spent in delivering services which may be billed; and
- Client staff ratios.

SUBPART B: PROVIDER ADMINISTRATIVE REQUIREMENTS

Section 132.65 Organizational structure

- a) The administrative organization shall promote effective operation of the various programs in a manner consistent with all applicable state laws, regulations, and adopted procedures.
- b) A provider must present written documentation of the existence of operating policies and procedures which detail and explain the operation of programs and the delivery of services, including a description of staff decision-making authority.
- c) A provider must present proof of insurance against professional and physical liabilities.
- d) A provider must present proof of written provisions for orientation and on-going communication with the governing board.
- e) A provider shall ensure the availability of staff and/or consultants capable of using language(s) or method(s) of communication used by Medicaid-eligible clients served by the provider.

Section 132.70 Personnel and administrative recordkeeping

- a) The provider shall have a comprehensive set of personnel policies and procedures that include but are not limited to:
- Job descriptions and qualifications, including but not limited to documentation of current licensure, and certification shall be maintained for all staff, including physicians who are employed either directly or by contract by the provider or by an agency subcontracting with the provider or program.

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- 2) Providers shall assure in writing that staff providing or supervising services pursuant to this Part meet the staff qualifications defined in this Part, and that their individual performance is evaluated no less frequently than once every twelve months.
- 3) Providers shall have documentation that they have written personnel policies concerning the hiring, evaluating, and disciplining (including terminating) of staff, including job descriptions for volunteers who will be providing Medicaid community mental health services.
- The provider shall document that it provides directly or indirectly for development and continuing education activities of its employees which broaden their existing knowledge in the field of mental health and related areas. These activities shall be related to program goals and may include support of staff attendance at conferences, university courses, visits to other agencies, use of consultants, educational presentations within the agency, assigned reading, and so forth.

Section 132.75 Program evaluation

The provider must document that it has and uses an active system of program evaluation for purposes of determining the degree to which the services are meeting their goals and objectives.

- a) This system shall monitor quantitative characteristics such as caseload information, and qualitative characteristics such as client satisfaction.
- The evaluation system shall include mechanisms for producing evaluation reports which describe the outcome of monitoring activities.
- c) The evaluation reports shall summarize data into useful information and provide recommendations for remedial action when necessary.

Section 132.80 Fiscal and statistical

a) Providers shall present written assurances that they will submit billings in the manner specified by the Department or DCFS and that they have a formal accrual accounting system in accordance with Generally Accepted Accounting Principles (GAAP) (Harcourt, Brace, Jovanovich, Publisher, 1989).

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- requirements (e.g., U.S. Office of Management and Budget Circular A-128, April 12, 1985 or Circular A-133 (Single Audit Information Service, Thompson Publishing Group, 1725 K. Street N.W., Suite 200, Washington, DC 20006)). The report shall contain all applicable statements including the basic financial statement presenting the disclaimer of opinion, or an adverse opinion, the reason shall be stated. (A report will not be accepted if the certified public The provider shall submit to the Department or DCFS annually an independent audit report 120 days after the end of the provider's These required audit reports shall be prepared in accordance with the current American Institute of Certified Public Accountants generally accepted auditing standards appropriate for the provider and in accordance with relevant federal single audit report shall contain the certified public accountant's opinion assertion to the effect that an opinion cannot be expressed. If the accountant's opinion is qualified or denied because the provider or an public accountant expresses a qualified opinion, operation, and changes in fund balances or retained earnings. financial position of the organization, the results of placed an unnecessary limitation on the scope of the audit.) regarding the financial statements, taken as a whole, certified
- c) The provider shall also submit within 180 days after the end of the state fiscal year the State of Illinois Interagency Statistical and Financial Report (ISFR) to the Department or DCFS unless either the Department or DCFS extends the time-frame for a provider having a different fiscal year than the State of Illinois.
- d) The provider shall also comply with the requirements governing audits, false reporting and other fraudulent activities, pursuant to 89 III. Adm. Code 140.30 and 140.35 for services provided to Medicaid-eligible clients. The provider will be held responsible for any claims disallowed resulting from non-compliance with this Part.
- e) Each provider shall contract with the Department and/or DCFS for the provision of Medicaid community mental health services.
- f) Billings for services rendered under the Medicaid community mental health program must be submitted by a provider to the Department or DCFS in the manner required by each department. The billings shall include the following:
- A claim for reimbursement for each covered item of service provided to a client.

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- 2) A claim for reimbursement shall be submitted during the state fiscal year the service was delivered within six months after the date that the service was delivered but in no case shall a claim be submitted later than 60 days from the end of the state fiscal year during which the service(s) was provided.
- The provider shall keep and make available such hardcopy records and source documents associated with each submitted reimbursement claim as necessary to disclose fully the nature and extent of service billings included therein.
- 4) Each reimbursement claim submitted to the Department or DCFS shall be accompanied by a transmittal document providing a description of the claim for reimbursement (submitting provider, number of claim transactions, etc.) and a signed certification for each such batch.
- g) The provider shall report to the Department or DCFS information regarding the client's private insurance coverage or third party liability coverage on the claim transaction. In addition, adjustments to prior approved claims must be submitted on the claim transaction. The provider shall bill all other third parties prior to billing the Department or DCFS for services and shall maintain a record of all such billings and payments received.
- h) Services such as individual, group, and family therapy, psychotropic medication, monitoring and self-administration training, crisis intervention and case management shall be reimbursed at an hourly rate per client payable to the nearest quarter hour.
- i) Day treatment services such as intensive stabilization and extended treatment and rehabilitation shall be reimbursed at an hourly rate per client payable to the nearest hour. Billable services are limited to five hours per day up to seven days per week.
- fsychiatric services provided by physicians are reimbursed directly by the Department of Public Aid.
- k) Community-based rehabilitation services shall be reimbursed as a consolidated set of comprehensive services payable at a daily rate.

Section 132.85 Recordkeeping

 a) The provider shall maintain in the regular course of business the following:

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Any and all business records which provide written documentation of financial arrangements between the provider and other providers in the program and other entities, or which are necessary to determine compliance with this Part, including but not limited to:

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- A) Business ledgers of all transactions;
- B) Records of all payments received, including cash;
- C) Records of all payments made, including cash;
- D) Corporate papers, including stock record books and minute books;
- E) Records of all arrangements and payments related in any way to the leasing of real estate or personal property, including any equipment;
- F) Records of all accounts receivable and payable; and
- G) Hard copy and source documents relating to the creation of the service billing files.
- Any and all client records which document the quality, type and quantity of services, including actual time and amount of time, provided by the provider for which payment is claimed under this Part. Such records shall also include written documentation of compliance with all Sections of this Part pertinent to service provision. (See also Section 132.100(h).)
- The business and client records required to be maintained must be retained for a period of not less than five years from the date of service, except that if an audit is initiated within the required retention period the records must be retained until the audit is completed and every exception resolved. This provision is not to be construed as a statute of limitations.
- All clinical and financial records required to be maintained shall be readily available for inspection, audit and copying (including photocopying) by Department or DCFS personnel and Department of Public Aid and U.S. Health Care Financing Administration compliance personnel during normal business hours at the provider's facility. Department or DCFS personnel shall make all attempts to examine such records without interfering with the professional activities of the provider.

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- d) The compilation and storage of and accessibility to client records shall be governed by written policies and procedures, in accordance with the Confidentiality Act, which shall specify that:
- Access to client records shall be limited to persons authorized by the Confidentiality Act and to the client;
- All entries in the client record shall be current, legible, dated and signed by the author;
- 3) Facilities for the handling, processing and storage of client records shall be secured from theft, loss, or fire and access limited to personnel authorized by the provider; and
- Client data maintained on magnetic tapes, computer files, or other automated information systems shall be secure from theft, loss, or fire.

Section 132.90 Provider site(s)

The provider shall:

- a) Use site(s) meeting accessibility standards as contained in the Illinois Accessibility Code (71 III. Adm. Code 400) pursuant to the Environmental Barriers Act (III. Rev. Stat. 1991, ch. 1111, par. 3711 at set)
- b) Comply with approved state and local ordinances and codes relating to fire, building and sanitation, health and safety requirements as follows:

1) Fire

- A) NFPA 10, Standard for Portable Extinguishers, (National Fire Protection Association, 1984);
- B) NFPA 220, Standard Types of Building Construction, (National Fire Protection Association, 1985);
- C) NFPA 255, Test of Surface Burning Characteristics of Building Materials (National Fire Protection Association, 1984);
- D) NFPA 258, Measuring Smoke Generated by Solid Material (Construction), (National Fire Protection Association, 1987);

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- Fire Resistance Index (Underwriters Laboratories, Inc., January 1987); (E)
- Laboratories, Building Material Index (Underwriters Inc., January 1987); (H
- The rules of the Office of the State Fire Marshal at 41 Ill. Adm. Code 100. 6

Building 5

- Stat. Rev. License Law (Ill. 1991, ch. 111, par. 1101 et seq.). Plumbing The Illinois A)
- (National Fire - National Electrical Code Protection Association, 1987). NFPA 70 B)
- The "Uniform" or "National Building Code" as adopted by the local or county ordinance. ວີ

Sanitation, health and safety 3)

- Have written policies and procedures for the provision of housekeeping services at the site(s). A)
- Develop and maintain an external and internal emergency disaster plan, including a fire evacuation plan. B)
- the to Designate space, equipment, and furnishings for provision of services which shall be conducive privacy, comfort and safety. ວ
- other than provider sites. Such locations include, but are not limited to, the client's residence, the client's school, a detention facility, or other agreed upon locations. Providers The Department or DCFS will not review for purposes of this Section providers which deliver Medicaid services exclusively in locations which deliver direct client services at the provider site shall be in compliance with the above provisions. ်

UTILIZATION REVIEW AND CONTINUITY OF SERVICES SUBPART C:

Section 132.95 Utilization review

There shall be a written utilization review (UR) plan and ongoing activities designed to assess the appropriateness of the admission to Medicaid community

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mental health services, intensity/level of services, and continued services. The written UR plan shall address:

- methods and procedures for performing and recording individual case reviews; The a)
- review case individual The designated unit may be: the of functions and designated unit. authority The **p**
- A committee representative of the staff providing the services which may include QMHPs, MHPs, RSAs, and chaired by a QMHP, or 1)

A QMHP; 5

- Procedures describing the method for selecting cases for quarterly case review and the procedures for reviewing 10 percent of the clients served under this Part annually; ်
- Procedures to ensure that the review includes and summarizes the client's progress over the previous 90 days; Ŧ
- Policies and procedures for documenting and reporting individual case reviews findings, determinations and recommendations to the supervising QMHP and, if applicable, the billing department; е Э
- Ŗ the ģ clients and staff affected decisions with which they disagree; for appeal by Procedures Ŧ
- determinations, results, and/or recommendations in accordance with Provisions for ensuring confidentiality of individual case reviews, the Confidentiality Act; g)
- Procedures for following up on case review recommendations; and 4
- Procedures to ensure that the final written approval and authorization for continuing treatment beyond established service utilization parameters is provided only by the signature of the reviewing QMHP. 1)

Section 132.100 Clinical records

the to, not limited is but contain, record shall client's clinical following: client date of identification number, address and telephone number, sex, Medicaid name, including information Identifying a)

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birth, primary language or method of communication, marital status, emergency contact or guardian, date of initial contact and initiation of mental health services, third party insurance coverage and source of referral;

Documentation of consent for mental health services;

P

- c) Assessment and reassessment reports;
- d) A current ITP or rehabilitative services plan, progress notes and reviews;
- e) Documentation concerning the prescription and administration of psychotropic medication;
- f) Documentation of missed appointments;
- g) Documentation of client movement (referral/transfer) during any active service period to or from the provider's programs or to or from other providers;
- h) Documentation to support each service rendered for which reimbursement is claimed which includes:
- The specific service(s) rendered;
- The date the service(s) were rendered;
- 3) Who rendered the service(s);
- 4) The setting in which the service(s) were rendered; and
- The relationship of the service(s) to the ITP or rehabilitative services plan goals and client progress.
- Periodic reviews describing the client's overall progress;
- j) Justification for extension of service durations beyond the maximum units as set forth in this Part;
- k) A record of grievances filed by the client, including the nature of the complaint, date of complaint, and a statement regarding the resolution of the complaint;
- A record of the client's major accidents or incidents that occur at the site with regard to a specific client, whether self-reported or

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observed, and resulting in an adverse change in the client's physical and/or mental functioning; and

m) Discharge summary documenting the outcome of treatment and, as necessary, the linkages for continued services.

Section 132.105 Continuity and coordination of services

The provider shall ensure the continuity and coordination of services as provided in the client's ITP. The provider shall:

- a) Communicate relevant treatment and service information prior to or at the time that the client is transferred to a receiving program of the provider, or is terminated from service and referred to a program operated by another service provider, if the client and/or parent or guardian provides written authorization;
- b) Document in the client's record the referrals to other human service providers and follow-up efforts to link the client to services; and
- c) Develop written agreements with other relevant human service providers in the service area, as necessary.

Section 132.110 Availability of services

- Medicald community mental health services shall be available and accessible to persons in need of such services as assessed and prescribed or recommended.
- Services shall be flexibly arranged to meet the needs of eligible clients, including arrangements for services during evenings, weekends or holidays.
- c) The provider shall have written policies stating how services are designed to minimize temporal, economic, procedural, cultural, or linguistic barriers to Medicaid community mental health service delivery.
- To assure access to Medicaid community mental health services for the client as well as for the accompanying parent, guardian, or To receive covered Medicaid services, of Public Aid as directly bill the may be provided. must enroll with the Department of transportation services" and for reimbursement transportation Department of Public Aid. providers must transportation "providers caregiver, q

CLINIC SERVICES SUBPART D:

Provisions Section 132.115

- community mental health services under the Medicaid clinic services option shall comply with the following: Providers which are certified and enrolled to provide Medicaid a)
- A provider contracting with the Department or DCFS must review, modification and psychiatric treatment as specified directly provide mental health assessment, ITP development, 1
- of mental illness as defined in Section 132.25 and whose level of role functioning is impaired as indicated by a GAF Clinic services shall be provided to clients with a diagnosis or CGAS score of 70 or below. 5
- Following an assessment, clinic services shall be prescribed by and provided under the direction of a physician. 3
- Clinic services shall be delivered by a physician or QMHP(s) and MHP(s) under physician direction pursuant subsection (b) below. 4
- of, or involvement of the physician in each client's ITP within 45 physician must document his or her direction by signing and dating his or her approval on the ITP or by signing a clinical note indicating concurrence with the ITP in the client's clinical record. Such review and approval of the ITP shall occur whenever there is a modification in the ITP or at least once every six months for all clients, whichever comes first. If the physician is not a psychiatrist, the physician must have access to a the physician must have one year of experience in the treatment of children and adolescents. To fulfill the requirements of physician provider shall ensure that physician direction of clinic responsibility by the physician for the formulation of, approval psychiatrist. If the physician is directing services for children, professional days from the date of completing the mental health assessment. direction, the physician must see the client at least once. οĘ assumption the include sha11 þ
- this Section shall be provided at a certified clinic site except as All Medicaid community mental health services delivered pursuant c)

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- any is Clinic services may be provided to homeless persons in setting(s) where the homeless individual to be served located 7
- initiated at non-clinic sites for a Medicaid-eligible client services are not provided in the client's residence, are urgently needed, and when it is apparent that þe follow-up psychiatric treatment or other clinic services may Crisis assessment and crisis intervention services may be deemed necessary. when such 5
- The Department or DCFS may grant a waiver of subsection (a)(1) above, if it deems that such waiver increases the availability of clinic services to Medicaid-eligible clients. g
- Enrolled providers must obtain certification for all mental health clinic services within 12 months after the provider's initial certification unless waived by the Department or DCFS. The provider shall enroll for certification of remaining services, using forms prescribed by the Department or DCFS. Services shall be certified based on compliance with the requirements of this utilization review documents and the inspection of the provider's Such compliance will be determined the review of Medicald-eligible client retrospective Subpart. e
- be provided to or arranged for clients as part of specific service categories listed in this Section, as necessary, for the receipt of mental health services. This may be provided following the development of an ITP for the duration of the service period or immediately in a crisis situation for the duration of the crisis access to services is limited by unavailability of alternative transportation or economic distress (i.e., the client lacks funds the client is otherwise unable to obtain services, to assure provision of services, to assure the safety and well-being of the The Department or DCFS will consider transportation necessary when client (e.g., transfer of a client in crisis to a hospital), when service period. Persons other than QMHP's and MHP's may transport or caregiver of a minor client may also be provided as necessary. In addition to the mental health interventions, transportation may the client. Transportation for the accompanying parent, guardian, for transportation). f)

Section 132.120 Service needs evaluation

The provider shall insure that an individual requesting Medicaid community mental health services, or any individual who has been a)

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to a recommendation resulting from an early and periodic screening, diagnosis and the treatment (EPSDT) examination shall receive an assessment process shall result in a determination of the need for mental health services and the type of Medicaid community mental and exhausting all other less restrictive alternatives available to referred by order of a court, or any individual referred pursuant mental health assessment, a health services required and shall ensure the appropriateness of admission for inpatient psychiatric hospitalization by examining mental health services. psychological assessment and/or a psychiatric evaluation. assessment of his or her need for process may include a meet the client's needs.

- needs evaluation shall include a face-to-face personal contact interview with the client and/or collaterals, service The **P**
- The service needs evaluation shall be initiated within five working days after the request or referral, or immediately in a crisis situation as specified in Section 132.135(b). ပ
- implementation of the ITP. If the client is A client shall receive a mental health assessment prior to the determined to be in need of immediate crisis intervention services, a mental health assessment shall not be required prior to the initiation of crisis services. development and Ŧ
- provider shall obtain written consent from the client and/or the client's guardian, if applicable, unless the client is determined to be in need of crisis intervention services, or if the assessment Prior to the initiation of the mental health assessment, is court-ordered for the client. (e
- the at a minimum, The mental health assessment shall include, assessment and written report of the following: (j
- Identifying information (see Section 132.100(a)); 7
- Extent, nature, and severity of presenting problem(s); 5
- Personal and family history including the history of mental illness in the family; 3
- attitudes), perceptual disturbances, thought content, speech, and affect; and an estimation of the ability and willingness memory, (attention, to participate in treatment; Cognitive functioning 7

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- History of mental health treatment; 2
- Present level of functioning including social adjustment and daily living skills; 6
- trust payee, representative beneficiary, pending court order); status (guardianship, 2
- Level of education and/or specialized training; 8
- and skills, vocational activities/interests, if applicable; acquired employment, Previous 6
- History of and/or current alcohol or chemical dependency; 10
- Previous and current psychotropic medications, last physical examination, and any known medical problems; 11)
- care health benefits, subsidized housing, social services, etc.). entitlements, Resource availability (income 12)
- guardian, if applicable, shall be apprised of the client's rights the mental health assessment, the client and the client's in accordance with Chapter 2 of the Code. 8
- guardian, if applicable, at the client's request or by agreement of the client, during which the family was given the opportunity to provide pertinent information or support. Other mental health professionals who are under the direct supervision of a QMHP may participate in the mental health assessment pursuant to Section Responsibility for the completed mental health assessment shall be conducted by a QMHP who has had, at a minimum, one face-to-face contact with the client, his or her family, and the client's 132.115. The mental health assessment shall not require physician prescription and direction. þ
- the directing physician and documented by a signature on the ITP. The directing physician shall make a determination if a psychiatric applicable, shall be conducted by the physician on a face-to-face basis with the client. The psychological assessment, if applicable, shall be conducted by a licensed psychologist on a evaluation and/or a psychological assessment is necessary in order If the mental health assessment is not conclusive and the client's diagnosis is deferred or a rule-out diagnosis is given, the provider has 45 days to results of the mental health assessment shall be reviewed by to develop the client's ITP. The psychiatric evaluation, face-to-face basis with the client. Ŧ

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determine the client's mental health needs and treatment. In instances when the diagnosis still cannot be determined or a rule-out diagnosis is given, the client's record must contain documentation as to what evaluations will be performed in order to provide a definitive diagnosis in the ITP.

j) The assessment report(s), including the mental health assessment and the psychiatric evaluation and psychological assessment, if applicable, shall be used in the development of the client's ITP.

Section 132.125 Treatment plan development and modification

- The individual treatment plan (ITP) shall be developed with the participation of the client and the client's guardian, if applicable. The plan shall be signed by the client if 12 years of age or older or by the parent or legal guardian of a minor or by the legally appointed guardian of an adult who has been adjudicated as legally alsabled, the QMHP and the physician who is directing the formulation of the ITP. A copy of the signed plan shall be given to the client, if not clinically contraindicated, and the client's parent or guardian, if applicable, and incorporated in the client's clinical record.
- b) The provider shall explain to the client and to the client's guardian, if applicable, the process for the development and the contents of the ITP.
- c) The ITP shall be developed within 45 days after the documented date of completing the mental health assessment. The ITP shall include a definitive diagnosis that has been determined using the DSM-III-R or the ICD-9-CM.
- d) The ITP shall state the overall goals of treatment and shall indicate the specific mental health services to be provided, in accordance with the following:
- Describe the mental health service needs of the client in relationship to the mental health service(s) to be provided;
- 2) Contain a statement relating to the goals, objectives and expected outcome(s) for the specific mental health service(s) provided to the client. The statement shall specify for each service:
- A) Long-term goals and specific intermediate objectives stated sequentially;

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- B) Planned intervention related to accomplishing the objectives including the frequency, quantity and duration of services;
- C) Date(s) on which each service objective was set and the expected length of service; and
- Identification of the professional staff with responsibility for managing each service objective.
- E) The ITP shall be under the direction of a physician, pursuant to Section 132.115. The QMHP shall participate in the development of the ITP under physician direction, pursuant to Section 132.115. Other mental health professionals who are under the direct supervision of the QMHP, pursuant to Section 132.120 may also participate in the development of the ITP.
- f) Clients who receive more than one type of mental health service shall have an ITP developed, reviewed, and modified, as necessary, by the team of individuals responsible for providing the respective services.
- g) The ITP shall be reviewed and modified, as necessary, but semi-annually at a minimum, for all clients by the directing physician and the QMHP involved in the formulation, implementation, and supervision of the ITP.
- h) If multiple providers are providing mental health services to the client, one master ITP shall be developed by the team of individuals responsible for providing the respective services.

Section 132.130 Psychiatric treatment

a) Service requirements

Psychiatric treatment services shall be provided to clients who require interpersonal therapy and/or psychotropic medication to promote growth in role functioning or to maintain role functioning in order to assist the client in functioning in the community.

- b) Psychiatric treatment psychotropic medication requirements include:
- 1) Psychotropic medication shall be prescribed by a physician licensed in accordance with the Medical Practice Act of 1987, who has conducted a psychiatric evaluation of the client, or in an emergency, is aware of the client's psychotropic

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medication history and the client's current level of functioning.

- 2) Psychotropic medication shall be administered by personnel licensed to administer medication pursuant to The Illinois Nursing Act of 1987 and the Medical Practice Act of 1987.
- 3) Psychotropic medication shall be reviewed every 90 days, at a minimum, by the physician.
- 4) Psychotropic medication shall be monitored and training shall be provided to clients in the following areas:
- A) Psychiatric illness;
- By chotropic medications, effects, side-effects, and adverse reactions;
- C) Self-administration of medications;
- D) Storage and safeguarding of medication; and
- E) Communicating with mental health professionals regarding medication issues.
- Notation shall be made in the client's clinical record regarding psychotropic medication and other types of medication. Notations shall include:
- A) All medication being taken by the client;
- B) Current psychotropic medication: name, dosage, frequency, and method of administration;
- C) Activities implemented to address any problem(s) resulting from psychotropic medication administration; and
- D) A statement indicating that the client has been informed of the purpose of the psychotropic medication ordered and the side effects of the medication.
- 6) Psychotropic and other medication shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, security and in accordance with 77 III. Adm. Code 300.1640.

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- Psychotropic medication monitoring and training shall be provided by the physician, by a QMHP under the direction of a physician, or by a MHP, under the supervision of a QMHP pursuant to Section 132.115. The physician must designate, in writing, the professionals who provide medication monitoring and training services, as medication monitoring and training staff.
- c) Psychiatric treatment primary therapy shall include:
- Individual therapy;
- 2) Group therapy; and
- Family therapy (includes couples' therapy and marital counseling).
- d) The services shall be provided:
- Following a mental health assessment consistent with the client's ITP;
- 2) On a face-to-face or personal contact basis with adult clients and their families at the client's request or agreement; or with groups of clients; or with a child or adolescent client and/or his or her family, based on the ITP; and
- In the provider's clinic.
- e) Service eligibility and termination criteria
- 1) Service eligibility criteria shall include a determination that the client's role functioning, is 70 or below, when not in crisis, as assessed using the GAF or CGAS Scales (see Section 132.135(b)(1)).
- 2) Service termination criteria shall include:
- A) Determination that the client's level of role functioning and the personal distress level has improved and has been maintained consistent with the rep. or
- B) Determination that the client's level of role functioning has significantly deteriorated to a degree

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where referral or a transfer to a more intensive mental health treatment is indicated; or

Documentation in the client's clinical record that the client terminated participation in the program.

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by a physician and delivered by a QMHP, or for psychotropic medication monitoring and training, an MHP under the supervision of a QMHP, pursuant to Section 132.115. Psychiatric treatment services shall be delivered by or prescribed

Section 132.135 Crisis intervention

Service requirements a)

- are experiencing a psychiatric crisis and a high level of personal distress to provide brief and immediate intensive treatment to reduce symptomatology, stabilize and restore the client to a previous level of role functioning and to assist Crisis intervention services shall be provided to clients who the client in functioning in the community. 7
- Crisis intervention shall include: 5
- Immediate preliminary assessment; ¥
- Therapy (brief and immediate); and B)
- with consultation appropriate mental health services. and linkage Referral, 6
- Crisis intervention services shall provide immediate crisis assessment to ensure the appropriateness of admission for psychiatric hospitalization by examining and exhausting all other less restrictive alternatives available to meet client's needs. 3
- Services shall be provided on a face-to-face or personal contact basis, following, at a minimum, an assessment (see Section 132.120(f)) of the need for Medicaid community mental health services. A preliminary ITP shall be developed and incorporated into the ITP, if continuing Medicaid community mental health services are provided. 4

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- Access, referral, and linkage with continuing mental health services shall be provided for clients in crisis, including residential crisis care, respite care, and/or inpatient psychiatric treatment, as determined by a QMHP under the supervision of a physician or prescribed by a physician. 2
- Service eligibility and termination criteria <u>ф</u>
- Crisis intervention services shall be available to persons presenting an apparent need for immediate mental health Service eligibility criteria shall include: services. 7
- role functioning within the past seven days which requires immediate resolution and stabilization to Determination of deterioration in one or more areas of prevent further deterioration in role functioning; or ¥
- substantial relieve ţ Determination that acute symptomatology deterioration in role functioning and prevent ţ immediate stabilization personal distress. B)
- Service termination criteria assessed by a QMHP under the supervision of a physician shall include: 6
- personal distress and is not in need of further mental Determination that the crisis has been resolved and the client shows positive change toward restoration to a previous level of role functioning and/or decrease in health services; or ¥
- mental health treatment for continuing mental health Determination that the client has been stabilized but to less intensive requires a transfer or referral services; or â
- Determination that the client has not been stabilized and the client requires a transfer or referral to more intensive mental health treatment for continuing mental health services; or ົວ
- Documentation in the client's clinical record that the client terminated participation in the program. â

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- prescribed by a physician and delivered by a QMHP pursuant to Section 132.115. Physician prescription, however, shall not be required prior to service initiation but shall be secured within five working days of service provision. The QMHP may also be assisted by other mental health professionals who are under the direct supervision of the QMHP pursuant to Section shall be delivered by intervention services 132, 115.
- and acuity in mental health assessment, crisis intervention Crisis intervention staff shall be selected for experience techniques, and effective clinical decision-making under emergency conditions. 5
- regular hours of service operation and, at a minimum, provide crisis assessment and referral to mental health services, as necessary, after the regular hours of operation. Written agreements shall be established for referral of clients to The number of crisis intervention staff shall be adequate to provide immediate crisis assessment, brief therapy, and referral and linkage on a face-to-face basis during the crisis intervention services after regular operating hours, is necessary. 3

Day treatment Section 132.140

Service requirements a)

- psychiatric and psychosocial treatment modalities addressing extended treatment and rehabilitation services provided on an comprehensive and complimentary schedule of Day treatment shall include intensive stabilization at least three areas of functioning: integrated, 7
- Psychological; ¥
- Interpersonal; and (A)
- Primary role. ວ
- not include services that are educational in nature; for example, services identified in the individual education plan Day treatment for individuals under the age of 21 years shall 5
- rehabilitation services shall include a range of therapeutic treatment extended and stabilization Intensive 3

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Interventions provided in a therapeutic milieu following mental health assessment, consistent with the client's ITP.

- stabilization of short-term problems or crisis situations which, if not treated, would require inpatient psychiatric minimum of four hours a day, five days per week with Intensive stabilization services shall be available for hospitalization including the provision of the following: resolution focused on of interventions schedule 4
- Therapy (individual, group and family); and 4
- Occupational therapy. â
- Extended treatment and rehabilitation services shall be available for a minimum of four hours a day, five days a week with a schedule of interventions focused on the development, acquisition, enhancement and/or maintenance of interpersonal and living skills to restore client functioning and to facilitate re-entry into the family and community, including the provision of the following: 2
- Therapy (individual, group and family); ¥
- Occupational therapy; and **B**
- Adaptive functioning, stabilization and developmental interventions. ပ
- Service eligibility and termination criteria **Q**
- intensive stabilization shall include determination that the client: for criteria eligibility service Specific 7
- requires immediate intervention to prevent further deterioration and the need for 24-hour supervised Exhibits signs, symptoms and associated features of role functioning in one or more primary areas, which mental illness and has experienced deterioration treatment, e.g., hospitalization; or ¥
- Requires further continuation of treatment following hospitalization because symptoms persist functioning has not improved. **a**
- Specific service eligibility criteria for extended treatment and rehabilitation shall include a determination that: 5

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- or below client's role functioning is 70 assessed using the GAF or CGAS Scales; A)
- adjustment, to maintain community lacks independent adaptive without structured intervention; and/or is unable client The B
- to allow planned attendance and increasing participation in a structured extended rehabilitation The client has a sufficient level of stress tolerance program. ဌ

Termination criteria 3

- intensive for criteria stabilization shall include: termination General A)
- role functioning restored consistent with ITP distress/crisis has been resolved and previous Determination that the client's level of acute objectives; or Ŧ
- In the that the client terminated participation Documentation in the client's clinical program. 11)
- General termination criteria for extended treatment and rehabilitation shall include: B)
- functioning has improved, and the rehabilitation services objectives have been obtained and maintained consistent with the ITP; or Determination that the client's level of role Ŧ
- Determination that the client's level of role functioning, as assessed using the GAF or CGAS Scales, has not improved or has deteriorated and the extended rehabilitation services objectives have not been obtained consistent with the ITP; 11)
- that the client terminated participation in the record Documentation in the client's clinical program. 111)

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- Intensive stabilization services shall be prescribed by a physician and delivered by a QMHP, and extended treatment and rehabilitation services shall be prescribed by a physician and delivered by a QMHP, or by an MHP under the direct supervision of the QMHP, pursuant to Section 132.115. 7
- Intensive stabilization services shall have a minimum of one full-time equivalent (FTE) QMHP to every six adult clients (1:6) or 1:3 for child and adolescent clients, based on average daily attendance calculated annually. 5
- Extended treatment and rehabilitation services shall have a minimum of one FTE MHP to 10 adult clients (1:10) or 1:6 to child and adolescent clients, based on average daily attendance calculated annually. 3

SUBPART E: REHABILITATIVE SERVICES

Section 132.145 Provisions

- Providers which are certified and enrolled to provide Medicaid community mental health services under the Medicaid rehabilitative services option shall comply with the following: a)
- minimum, directly provide mental health assessment, ITP development, review, modification and at least one of the A provider contracting with the Department must, at following: 7
- Intensive stabilization services; 8
- Extended treatment and rehabilitation services; a
- Psychosocial rehabilitation day program services; ວ
- Individual/family social rehabilitation; â
- Community-based rehabilitation; or Ω Ω
- for children and Intensive family-based services adolescents. 됴
- A provider contracting with DCFS must provide directly or by tive services ITP development, review, modification and at least one other rehabilitative service as specified in subcontract rehabilitative services assessment, rehabilita-Section 132.155. 6

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- shall be responsible for recommending medically necessary rehabilitative services. A physician or LPHA 3)
- approval of the ITP or rehabilitative services plan, review specified rehabilitative services, including review and and approval of modifications in the ITP or rehabilitative services plan, and periodic review of the client's progress is provided in accordance with Sections 132.150 and/or clinical direction ensure that shall provider 4
- All Medicaid community mental health services delivered non-clinic locations and in other locations where the clients be provided on-site. pursuant to this Subpart may to be served are located. 2
- specified in subsection (a)(1) or (a)(2) above, if it deems that such waiver increases the availability of rehabilitative services to Medicaid-eligible clients. The Department's waiver may include a The Department or DCFS may grant a waiver of any of the services substitution of other services as specified in Section 132.150, excluding Section 132.150(j). Q

Section 132.150 Rehabilitative mental health services

- diagnosis of mental illness as defined in Section 132.25 and whose Services under this Section shall be provided to clients with a level of role functioning is impaired as indicated by a GAF or CGAS score of 70 or below. a a
- A physician or a LPHA shall provide clinical direction of the provision of rehabilitative mental health services which shall include review and approval of ITP development and modification. Such ITP shall be reviewed and modified, as necessary, but no less than once every six months. **Q**

Service needs evaluation G

been referred by order of a court or any individual referred examination, shall receive an evaluation of his or her need for mental health services. The service needs evaluation Medicaid community mental health services, any client who has provider shall ensure that an individual requesting pursuant to a recommendation resulting from an early and psychological assessment and/or a psychiatric evaluation. health assessment, treatment screening, diagnostic and include a mental process may 7

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service needs evaluation process shall result in a determination of the need for mental health services and the type of mental health services required and shall ensure the appropriateness of admission for inpatient psychiatric hospitalization by examining and exhausting all other less restrictive alternatives available to meet the client's needs.

- The service needs evaluation shall include a face-to-face or personal contact interview with the client and collaterals, as indicated. 5
- The service needs evaluation shall be initiated within five working days after the request or referral, or immediately in a crisis situation. 3
- the development and implementation of an ITP. If the client is determined to be in need of immediate crisis intervention services, a mental health assessment shall not be required A client shall receive a mental health assessment prior to prior to the initiation of crisis services. 7
- Prior to the initiation of the mental health assessment, the provider shall obtain written consent from the client and/or the client's guardian, as applicable, unless the client is determined to be in need of crisis intervention services, or if the assessment is court-ordered for the client. S
- The mental health assessment shall include, at a minimum, the compilation, assessment and written report of the following: 9
- Identifying information (see Section 132.100(a)); 7
- Extent, nature, and severity of presenting problem(s); 8
- Personal and family history including the history of mental illness in the family; ပ
- attitudes), perceptual disturbances, thought content, speech, and affect; and an estimation of the ability Cognitive functioning (attention, memory, information, and willingness to participate in treatment; 6
- History of mental health treatment; (E
- social including Present level of functioning adjustment and daily living skills; 6

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- Legal status (guardianship, representative payee, trust beneficiary, pending court order); 6
- Level of education and/or specialized training; Ĥ
- Previous employment, the acquired vocationel skills, and activities/interests. if applicable; a
- chemical or current alcohol and/or o dependency; History î
- physical examination, and any known medical problems; psychotropic medications, Previous and current K)
- subsidized housing, social income entitlements, (1.e., availability care benefits, services). Resource health 2

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- Responsibility for the completed mental health assessment shall be assumed by a QMHP who has had, at a minimum, one face-to-face contact with the client, his or her family and the client's guardian, if applicable, at the client's request or by agreement of the client, during which the family was given the opportunity to provide pertinent information or An MHP(s) under the direct supervision of a QMHP may participate in the mental health assessment. Support. 2
- mental health assessment may be initiated without the prior recommendation of the physician or LPHA. The •
- in order to develop the client's ITP. A psychiatric if recommended, shall be conducted by the by a licensed clinical psychologist on a face-to-face besis by the physician or LPHA and documented by signature on the ITP. The physician or LPHA shall determine if a psychiatric eveluation and/or a psychological assessment is necessery psychological essessment, if recommended, shall be conducted The results of the mental health assessment shall be reviewed physician on a face-to-face basis with the client. evaluation, 6
- The service needs evaluation report(s), including the mental health assessment, the psychietric evaluation, if eppliceble, the psychological assessment, if applicable, shall be used in the development of the client's ITP. end 10)
- Treetment plan development, review end modification Ŧ

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guardian, if applicable, the process for the development and The provider shall explain to the client and to the client's the contents of the ITP. 7

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- appointed guardian of an adult who has been adjudicated as legally disabled, the QMHP, and the physician and/or LPHA involved in the formulation of the ITP. A copy of the signed client and the client's guardian, if applicable. The plan shell be signed by the client if 12 years of age or older or by the parent or legal guardian of e minor or by the legally plen shall be offered to the client, if not clinically contraindiceted, and the client's perent or guardian, if epplicable, and incorporated in the client's clinical record. The ITP shall be developed with the participation of
- documented date of completing the mental health assessment. The ITP shall include a definitive diagnosis that has been determined using the DSM-III-R or ICD-9-CM. If the diagnosis cennot be determined within 45 days or a rule-out diagnosis given, the client's clinical record must contain documentation as to what evaluation(s) will be performed in The ITP shall be developed within 45 days after order to provide a definitive diagnosis in the ITP.
- The ITP shall state the overall goals of treatment and shall indicate the specific mental health services to be provided. In accordance with the following: 7
- Description of the mental health service needs of the client in relation to the rehabilitative mental health service(s) to be provided; 3
- Contain a statement relating to the goals, objectives and expected outcome(s) for the specific rehabilitative mental heelth service(s) provided to the client. The statement shall specify for each service: **a**
- intermediate specific objectives steted sequentielly; goals and Long-term 7
- end Planned intervention releted to eccomplishing objectives including the frequency, quantity duration of services; 11)
- Dete(s) on which each service objective wes set and the expected length of service; end 111)

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- iv) Identification of the professional staff with responsibility for managing each service objective.
- 5) Responsibility for development of the ITP shall be assumed by a QMHP as documented by his or her signature on the ITP.
- 6) A physician or LPHA shall provide the clinical direction of rehabilitative mental health services identified in the ITP as documented by his or her signature on the ITP. Such clinical direction includes reviewing the plan no less than once every six months and modifying the plan as necessary.
- Mental health professionals may participate in the development of the ITP.
- 8) If multiple providers are involved in providing services under this Section, one master ITP shall be developed by the team of individuals responsible for providing the respective services.

Psychiatric treatment

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- 1) Psychotropic medication requirements include:
- A) Psychotropic medication shall be prescribed by a physician who has conducted a psychiatric evaluation of the client, or in an emergency, is aware of the client's psychotropic medication history and the client's current level of functioning.
- B) Psychotropic medication shall be administered by personnel licensed to administer medication pursuant to The Illinois Nursing Act of 1987 and the Medical Practice Act of 1987.
- C) Psychotropic medication shall be reviewed every 90 days, at a minimum, by the physician.
- D) Psychotropic medication monitoring and self-administration training shall be provided to clients in the following areas:
- i) Psychiatric illness;
- Psychotropic medications, effects, side-effects, and adverse reactions;

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- iii) Self-administration of medications;
- iv) Storage and safeguarding of medication; and
- communicating with mental health professionals regarding medication issues.
- E) Notation shall be made in the client's clinical record regarding psychotropic medication and other types of medication. Notations shall include:
- 1) All medication being taken by the client;
- Current psychotropic medication: name, dosage, frequency, and method of administration;
- iii) Activities implemented to address any problem(s) resulting from psychotropic medication administration; and
- iv) A statement indicating that the client has been informed of the purpose of the psychotropic medication ordered and the side effects of the medication.
- Psychotropic and other medication shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, security and in accordance with 77 Ill. Adm. Code 300.1640.
- G) Psychotropic medication monitoring and training shall be provided by the physician, by a QMHP under the direction of a physician, or by a HHP under the supervision of a QHHP. The physician must designate, in writing, the professionals who provide medication monitoring and training services, as medication monitoring and training staff.
- 2) Therapy or counseling shall include:
- A) Individual therapy or counseling:
- B) Group therapy or counseling; and
- C) Family therapy (includes couples' therapy and marital counseling) or family counseling.

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- 3) The sarvicas shall be provided:
- A) Following a mental health assassment and consistent with the client's ITP;
- D) On e face-to-fece or personal contact besis with edult clients and thair families, at the client's request or agraement; or with groups of clients; or with e child or edolescant client and/or his or her family, end based on the ITP:
- 4) Service terminetion criteria shell include:
- A) Detarmination that the client's level of role functioning and the personal distress level heve improved end have been mainteined consistent with the ITP: or
- B) Determinetion that the client's level of role functioning has significently deterioreted to e degree whara refarral or a transfer to e more intensive mental health treatment is indicated; or
- G) Documentetion in the client's clinical record that the client terminated perticipation in the program.
- Psychietric transment sarvices shell be provided in accordance with tha following:
- A) Therapy sarvices shall be provided by a QMHP.
- B) Counsaling may be provided by a QMMP or MMP.

f) Crisis intervention

- 1) Crisis intervention services shall be provided to clients who ere expariencing a psychiatric crisis end e high level of personal distress to provide brief and immediate intensive tretment to reduce symptomatology, stebilize end restore the client to e pravious level of role functioning end to essist the client in functioning in the community.
- 2) Crisis intarvention services shall include:
- A) Immediate preliminary assessment;
- B) Therapy or counseling (brief and immediate); and

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- C) Referral, linkege and consultation with other appropriete mentel health services.
- Crisis intervention services shall provide immediate crisis essessment to ensure the appropriateness of edmission for psychietric hospitelization by examining end exheusting all other less restrictive elternetives aveilable to meet the client's needs.

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Services shall be provided on a face-to-face or personal contect basis, following, at a minimum, an assessment of the need for mental health services. A preliminary ITP shall be developed and incorporated into the ITP, if continuing mental health services are provided.

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- Grisis intervention services may be initiated prior to development of the ITP. Referrel end linkege with continuing mentel health services shall be provided for clients in crisis, including residential crisis cere, respite cere, and/or inpetient psychietric treetment, es needed.
- 6) Service eligibility and termination criterie
- A) Crisis intervention services shell be eveilable to clients presenting en epperent need for immediete mentel health services. Service eligibility criterie shall include:
- 1) Determination of deterioretion in one or more erees of role functioning within the past seven deys which requires immediate resolution and stabilization to prevent further deterioretion in role functioning; or
- Determinetion that acute symptomatology requires immediete stebilization to prevent substantiel deterioretion in role functioning and to relieve personel distress.
- B) Service terminetion criterie shall include:
- 1) Determination that the crisis has been resolved end the client shows positive change toward restoration to a previous level of role functioning end/or decreese in personal distress and is not in need of further mental health services; or

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- but requires a transfer or referral to less intensive mental health treatment for continuing Determination that the client has been stabilized mental health services; or 11)
- stabilized and the client requires a transfer or more intensive mental health treatment for continuing mental health services; Determination that the client has not t referral 111)
- that the client terminated participation in the Documentation in the client's clinical program. į.v)
- MHP with access to a QMHP who is available for immediate consultation and clinical supervision. Crisis intervention services may be delivered by a QMHP or an 2
- minimum, provide crisis assessment and referral to mental health services, as necessary, after the regular hours of operation. Written agreements shall be established for counseling, and referral and linkage on a face-to-face basis during the regular hours of service operation and, at a The number of crisis intervention staff shall be adequate to referral of clients to crisis intervention services after provide immediate crisis assessment, brief therapy regular operating hours, as necessary. 8

rehabilitation treatment programs Day 8

- levels of rehabilitative mental health services provided within a format of structured daily activities which are designed to promote improvement in psychological, and age-appropriate or independent role Such programs are specified as intensive stabilization services, extended treatment and rehabilitation services. Each service provides an integrated, comprehensive and complimentary schedule of psychiatric and/or psychosocial in a therapeutic milieu Day rehabilitation treatment programs may include three functioning which shall include intensive stabilization, psychosocial day treatment and rehabilitation and addressing at least three areas of functioning: or psychosocial rehabilitation treatment modalities provided rehabilitation. interpersonal, services, extended 7
- Psychological;

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- Interpersonal; and
- Age-appropriate or independent role functioning. ົວ
- rehabilitation treatment programs for individuals under the age of 21 years shall not include services that are educational in nature; for example, services identified in the individual education plan (IEP). 5
- rehabilitation services shall include a range of therapeutic interventions provided following a mental health assessment extended treatment and consistent with the client's ITP. stabilization and <u>e</u>
- Intensive stabilization services shall be available for a minimum of four hours a day, five days a week with a schedule treated, would require inpatient psychiatric hospitalization of interventions focused on resolution or stabilization of short-term problems or crisis situations which, if not including the provision of the following: •
- Therapy (individual, group and family); and
- Occupational therapy. B)
- and adaptive functioning to restore client functioning, and to facilitate re-entry into the family and community, available for a minimum of four hours a day, five days a week with a schedule of interventions focused on the development, acquisition, enhancement and/or maintenance of interpersonal shall treatment and rehabilitation services Including the provision of the following: 2
- Therapy (individual, group and family); 2
- Occupational therapy; and B
- Adaptive functioning, stabilization and developmental interventions. ົວ
- available for a minimum of four hours a day, five days a Psychosocial rehabilitation day program services shall be Individuals participate in services based on their individualized needs consistent with their ITPs. 9

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- rehabilitation day program services include age-appropriate or independent role functioning and include: which elements service core of Psychosocial 2
- Individual or group counseling; A)
- functioning, stabilization, and developmental interventions; and adaptive group or Individual В)
- Community integration and reintegration. ပ
- Service eligibility and termination criteria 8
- intensive that the for determination criteria Specific service eligibility stabilization shall include client: (A
- deterioration in role functioning in one or more intervention to prevent further deterioration and Exhibits signs, symptoms and associated features experienced immediate the need for 24-hour supervised treatment, e.g., which requires has and illness hospitalization; or areas, mental ÷
- treatment symptoms persist and role functioning has not improved. oę because continuation hospitalization further following Requires ii)
- rehabilitation day program services shall include a treatment and rehabilitation services and psychosocial extended Specific service eligibility criteria for determination that: B
- skills, and/or is unable to maintain community adjustment The client lacks independent living without structured intervention; or ĵ,
- The client has a sufficient level of stress increasing participation in a structured extended tolerance to allow planned attendance rehabilitation program. 11)
- intensive for criteria stabilization shall include: termination ြ

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- role functioning restored consistent with ITP Determination that the client's level of acute previous distress/crisis has been resolved and objectives; or 1)
- record that the client terminated participation Documentation in the client's clinical 11)
- General termination criteria for extended treatment and rehabilitation services and psychosocial rehabilitation day program services shall include: â
- Determination that the client's level of role functioning has improved, and the rehabilitation services objectives have been obtained and maintained consistent with the ITP; or Ŧ
- functioning, as assessed using the GAF or CGAS Scales, has not improved or has deteriorated and the extended rehabilitation services objectives have not been obtained consistent with the ITP; Determination that the client's level of 1i)
- record that the client terminated participation in the Documentation in the client's clinical program. 111)

Staffing 6

- a QMHP. Extended treatment and rehabilitation services rehabilitation day program services may be delivered by Intensive stabilization services shall be delivered by or MHP. Psychosocial delivered by a QMHP 8
- of one full-time equivalent (FTE) QMHP to every six adult clients (1:6) or 1:3 for child and adolescent clients, based on average daily attendance calculated Intensive stabilization services shall have a minimum annually. B)
- Extended treatment and rehabilitation services shall have a minimum of one FTE MHP to 10 adult clients (1:10) or 1:6 to child and adolescent clients, based on average daily attendance calculated annually. င်

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- D) Psychosocial rehabilitation day program services shall have a minimum of one FTE MHP to 15 clients (1:15). based on average daily attendance calculated annually.
- h) Individual/family social rehabilitation

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- Services shall be delivered following a mental health assessment, in goal directed sessions using clearly defined formats, and be focused on improving adaptive functioning deficits identified in the ITP.
- Services shall be provided individually or in a group setting on a face-to-face basis with the client or with the client and/or the client's family.
- 3) Service eligibility shall include a determination that the client or the client and the client's family has adaptive functioning deficits for which social rehabilitation is the appropriate intervention.
- 4) Service termination criteria shall include a determination that the service objectives have not and/or are unlikely to be met through continuation of this service or documentation in the client's clinical record that the client terminated participation in the program.
- Client/family social rehabilitation services shall be provided by MHP(s).
- Community-based rehabilitation

In order to provide community-based rehabilitation, the provider shall be licensed in accordance with 59 Ill. Adm. Code 115 (Standards and Licensure Requirements for Community-Integrated Living Arrangements).

- Client-centered consultation
- Is provided on a face-to-face or personal contact basis for the purpose of implementing and/or evaluating the implementation of the client's ITP.
- 2) May include:
- A) A scheduled meeting or conference for professional communication between provider staff and staff of other agencies, child-caring systems including school

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personnel or other professionals involved

treatment process.

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- B) A scheduled meeting or conference for professional communication between provider staff and family members involved in the treatment process.
- 3) Must be provided in conjunction with one or more rehabilitative mental health services as specified in this Section and may be provided without prior authorization in the ITP up to 12 hours per year.
- 4) Does not include advice given in the course of clinical staff supervisory activities, in-service training, treatment planning or utilization review and may not be billed as part of the assessment process.
- May be provided by a QMHP or MHP.
- k) Intensive family-based services for children and adolescents
- Intensive family-based services:
- A) Shall be provided to a child or adolescent with a mental illness and to his or her other family members as needed to support the rehabilitation and restoration of the child or adolescent to an optimal level of functioning and to reduce the risk of more restrictive treatment for the child or adolescent such as psychiatric hospitalization.
- B) Are concentrated therapeutic activities which may include:
- One-to-one counseling for therapeutic activities;
- ii) Counseling related to ITP goals and objectives;
- iii) Individual/family social rehabilitation related to the child's emotional deficits;
- iv) Counseling in behavioral management; and
- v) Assistance in household management related to the provision of mental illness-related care services for the child.

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- Are generally provided in-home or at other off-site locations and are made available when and where the needs of the child and family can best be met. ວ
- rehabilitative mental health services and are primarily used as a catalyst to stabilize acute crisis situations with and/or to diffuse or avert a family crisis. conjunction in provided â
- A client 17 years of age or younger and his or her family are eligible for services when the level of the client's or his or her family's role functioning requires in-home or other intensive therapeutic interventions to avoid more restrictive services, such as inpatient hospitalization or other out of home placement. 5
- services shall include a determination that the child's and his or her family's level of role functioning has improved or has been stabilized to allow for transfer or referral to less intensive rehabilitative mental health services or case termination criteria for intensive family Generally 3
- Services may be provided by an MHP. 7

Section 132.155 Family intervention, stabilization and reunification services

- Services under this Section are provided to clients with substantial impairment in role functioning as indicated by an ICD-9-CM diagnosis who DCFS has determined require services pursuant to one of its legal mandates for the purpose of assuring the protection and permanency of one or more child or adolesment members of the family, and who meet one or more of the following conditions: a)
- A child for whom DCFS is legally responsible who is placed in a relative foster home, a licensed foster home, group home or, as permitted by federal law, a child care institution and child has been determined to: 7
- Be demonstrating behavioral and/or emotional responses so different from generally accepted age-appropriate, ethnic or cultural norms as to result in a significant educational progress and behavior, work adjustment, or relationships, social family (or equivalent) adjustment; or self-care, in ¥

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- Be at risk or has actually experienced separation from his or her family. (A)
- above when involvement of the child's family in services is identified as directly related to the child's problems and is also identified in the child's rehabilitative services Members of the family of a child described in subsection (a)

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- A child for whom DCFS is legally responsible or an other child served by DCFS who resides with his or her parent or guardian and the child meets one of the criteria listed in subsection (a)(1) above. 3
- family in services is directly related to resolving the child's problem as identified in the child's rehabilitative one of the criteria in subsection (a)(1) above is residing with his or her parent or guardian and involvement of the Members of the family served by DCFS when the child who meets services plan. 4
- When the parent or guardian with whom the child resides has a DSM-III-R diagnosis of mental illness, a GAF score of 70 or less, and successful treatment of the illness is essential for the child's protection and/or permanency, services shall be provided in accordance with Section 132.150. Э

Rehabilitative assessment ົວ

- A rehabilitative assessment shall be initiated within five working days after a written referral or a verbal request which is confirmed in writing within 48 hours. 7
- The rehabilitative assessment shall include a face-to face or personal contact interview with the client and collaterals as 5
- A psychiatric evaluation, if applicable, shall be conducted by a physician on a face-to-face basis with the client. 3
- A psychological assessment, if applicable, shall be conducted by a licensed clinical psychologist on a face-to-face basis 4
- The rehabilitative assessment shall include at a minimum the items identified in Section 132.150(c)(6). 2

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- determination that additional services under this Section are required, such services shall be recommended by a physician results assessment rehabilitative 6
- Responsibility for the completed rehabilitative assessment shall be assumed by staff possessing a master's degree in human services or a bachelor's degree in human services and client, when the family can provide pertinent information or support, is required by the staff responsible for completing having five years of human services experience who may be assisted by staff with a minimum of a bachelor's degree in human services. A minimum of one face-to-face contact with if applicable, at the client's request or by agreement of the the client and his or her family, and the client's guardian, the rehabilitative services assessment. 2
- determination of the specific rehabilitative services and the stabilization services pursuant to subsection (f) below, a rehabilitative assessment shall not be required prior to the initiation of services. If the client is determined to be in need of immediate rehabilitative crisis intervention and A client determined to be in need of rehabilitative services shall receive a rehabilitative assessment prior to the of rehabilitative crisis intervention stabilization services. initiation 8
- Rehabilitative services plan development, review and modification Ŧ
- applicable. The plan shall be signed by the client, if 12 years of age or older, or by the parent or legal guardian of the minor client, the staff who developed the plan and the The rehabilitative services plan shall be developed with the physician, LPHA or QMHP. A copy shall be given to the client, if not contraindicated, and the client's parent or guardian, if applicable, and incorporated in the client participation of the client and the client's guardian, record. 7
- face-to-face contacts, collateral contacts, and meetings with The rehabilitative services planning process consists 5
- The rehabilitative services plan shall be developed within 45 of completing the rehabilitative The documented date rehabilitative services assessment. days after the 3

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services plan shall include a diagnosis as specified in the DSM-III-R or ICD-9-CM.

- of the services, identify the specific rehabilitative services to be provided, the duration of services and the The rehabilitative services plan shall state the overall anticipated outcomes. 7
- plan shall be assumed by staff having at least a bachelor's Responsibility for development of the rehabilitative services degree in human services with two years of human services 3
- rehabilitative services under Section 132.150 shall comply also for clients who with the provisions of Section 132.150(d). planning process The 6
- direction of family intervention, stabilization and reunification services identified in the rehabilitative services plan. Such clinical direction includes reviewing A physician, LPHA or QMHP shall provide ongoing clinical the plan no less than once every six months and modifying the plan, as necessary. 2
- A physician or a LPHA shall determine the continuing necessity for services under this Section at least annually. 8
- If multiple providers are involved in providing services described in this Section, one master rehabilitative services developed by the team of individuals responsible for providing the respective services. þe plan shall 6

Rehabilitative counseling **6**

- Rehabilitative counseling shall be provided in accordance with a rehabilitative services plan for the purpose of behavioral or functional changes in the eligible adult or child which are necessary for the individual's day-to-day functioning. 7
- Rehabilitative counseling activities may include individual, group or family counseling. 5
- Responsibility for the provision of rehabilitative counseling shall be assumed by an individual possessing at least a bachelor's degree in human services with one year of human services experience. 3

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Rehabilitative crisis intervention and stabilization

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- Rehabilitative crisis intervention and stabilization services shall be provided to all eligible clients who experiencing an acute crisis which threatens safety functioning, or extrusion from the family. 7
- Rehabilitative crisis intervention and stabilization shall include: 5
- Immediate preliminary assessment; ¥
- Counseling; and â
- necessary medically applicable rehabilitative services. other ಭ ວ
- rehabilitative crisis intervention and stabilization us consists of face-to-face or personal contact short-term placement a client, and process consists intervention with prevention services. 3
- clinical shall be delivered by staff possessing a bachelor's degree in human services with one year of human services experience. Pre-psychiatric hospitalization screening shall be handled only by a QMHP or by an MHP with access to a QMHP who is Rehabilitative crisis intervention and stabilization services and consultation immediate for supervision. available 4
- Rehabilitative consultation and review ŝ
- Rehabilitative consultation and review activities an provided in accordance with a rehabilitative services plan. activities 7
- тау activities review Rehabilitative consultation and include: 2
- Scheduled multidisciplinary case consultations with other external professionals or agencies; A)
- Attendance at and participation in required DCFS case reviews including administrative case reviews; and B
- Participation in scheduled court hearings. ပ

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- Responsibility for rehabilitative consultation and review activities is limited to: 3
- Staff serving as case managers/lead workers and their supervisors; ¥
- multidisciplinary ત્વ of part consultation team; and/or as Staff meeting 8
- Staff participating in required DCFS reviews, including administrative case reviews. ົວ
- Rehabilitative stabilization services P
- Rehabilitative stabilization services shall be provided in accordance with specifications in a rehabilitative services plan in order to develop or maintain an adult's or child's functioning. 7
- Rehabilitative stabilization activities may include: 5
- Parental functioning development; ¥
- Individual functioning development; â
- Self management functioning development; ວ
- or Parent-child interaction functioning development sibling interaction functioning development; â
- Self-management development; and **⊕**
- Family management development. £
- stabilization services shall be assumed by a person with no less than two years of human services experience or a rehabilitative of rehabilitative services associate (RSA). provision the for Responsibility 3

Developmental rehabilitative services Ŧ

Developmental rehabilitative services shall be provided in accordance with a rehabilitative services plan to restore a child or adolescent to a maximum level of functioning. 7

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Developmental rehabilitative services may include time spent in activities using art, music, drama, play or recreation either to individuals or as a group activity. 5

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rehabilitative services shall be assumed by an individual possessing a bachelor's degree in the specific area plus at developmental least two-years experience in the specific area. of provision for Responsibility 3

SUBPART F: CASE MANAGEMENT SERVICES

Section 132.160 Provisions

A provider contracting with the Department or DCFS and certified under Subpart D or E of this Part may apply for certification in accordance with the provisions of this Subpart.

Section 132.165 Mental health case management services

- Mental health case management services may be provided to any individual receiving services in accordance with Subpart D or E of this Part who has a mental illness. a)
- Mental health case management activities shall include: 9
- Linkage with a continuum of mental health services; 7
- Linkage with basic resources, which may include: 5
- financial, medical and other public Applying for entitlements; ¥
- Locating housing; â
- Obtaining medical and dental care; ົວ
- Obtaining other social, educational, vocational, and recreational services. â
- solving/resolution to assist the client in building community and assistance with support and family support systems; Client-specific advocacy 3
- 24-hour crisis response availability, either directly or written interagency agreements which assure that a QMHP or MHP assesses the situation and makes a determination of the proper course of action. through 4

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- ţ ΊĘ the client's request or agreement or based on the ITP, primarily in a mental health assessment and be authorized consistent with the needed) on a face-to-face basis or personal contact basis with the the public aid offices, restaurants, or neighborhood centers), at Mental health case management services shall be provided following client, his or her family, or other persons (such as employees of client's ITP (except that immediate assistance may be provided obtain food, shelter and clothing without prior authorization, the client's own home or other appropriate community locations.
- Service eligibility criteria shall include a determination that: g
- vocational, housing, public income entitlements and other community services to assist the client in functioning in the accordance with Subparts D or E of this Part and requires to social, educational, The client is currently receiving mental health services in gaining access assistance 7
- The client is planned to be discharged from an inpatient psychiatric facility and may require linkage with a provider for continuing mental health services and community/family support, and may be in need of immediate assistance in securing appropriate housing and income entitlements in order to function independently in the community. 6
- Service termination criteria shall include: (e
- Determination that the client's level of role functioning has improved and has been maintained consistent with the ITP, and that the client is no longer in need of advocacy to support adequate role functioning; or 7
- is person-to-person contact between a client and the staff of services and the mutual agreement between a client and the Determination that the client has been successfully linked with appropriate mental health services and other basic services consistent with the ITP and is no longer in need of assistance or advocacy to maintain them. Successful linkage a community provider which has agreed to provide necessary staff of the community provider that appropriate services available and are likely to meet the client's needs; or 5
- the client client's record that terminated participation in the program. the in Documentation 3

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- Mental health case management services may be provided by a QMHP or by an MHP. f)
- The annual maximum units for mental health case management services shall not exceed 240 hours and such units are billed in 15 minute increments. 8

132.170 Rehabilitative case management Section

- substantial impairment in role functioning as indicated by an ICD-9-CM diagnosis who DCFS has determined require services pursuant to one of its legal mandates for the purpose of assuring the protection and permanency of one or more child or adolescent members of the family; and who meet one or more of the following to clients Section are provided Services under this a)
- A child for whom DCFS is legally responsible who is placed in a relative foster home, a licensed foster home, group home or, as permitted by federal law, a child care institution and child has been determined to: 1
- so different from generally accepted age-appropriate, ethnic or cultural norms as to result in a significant immairment in self-care, social relationships, Be demonstrating behavioral and/or emotional responses educational progress and behavior work adjustment, or family (or equivalent) adjustment; or ¥
- Be at risk or has actually experienced separation from his or her family. B)
- Members of the family of a child described in subsection (a) above when involvement of the child's family in services is identified as directly related to the child's problems and is also identified in the child's rehabilitative services 5)
- A child for whom DCFS is legally responsible or other child served by DCFS who resides with his or her parent or guardian and the child meets one of the criteria listed in subsection 3
- Members of the family served by DCFS when the child who meets one of the criteria in subsection (a)(1) above is residing with his or her parent or guardian and involvement of the family in services is directly related to resolving the 4

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child's problem as identified in the child's rehabilitative services plan.

- When the parent or guardian with whom the child resides has a DSM-III-R diagnosis of mental illness, a GAF score of 70 or less, and mental health case management services are needed to support to be child's protection and/or permanency, services are provided in accordance with Section 132.165. the <u>ф</u>
- Rehabilitative services coordination ၁
- Rehabilitative services coordination shall be provided in accordance with a rehabilitative services plan to assist eligible adults and children access and participation in recommended rehabilitative services. 7
- Rehabilitative services coordination activities may include all direct or collateral contacts, including problem-solving intervention of a short duration, with or on behalf of the eligible client, which are intended to coordinate client's access to and receipt of recommended services. 5
- Responsibility for the provision of rehabilitative services coordination shall be assumed by a person who has no less than two years of human services experience or a RSA. 3
- Rehabilitative transition linkage and aftercare services ਚ
- Rehabilitative transition linkage and aftercare services shall be provided to eligible children to assist in an effective transition in living arrangement consistent with the child's welfare and development. 7
- services aftercare and activities may consist of the time spent: Rehabilitative transition linkage 5
- Planning with staff of current or receiving living arrangements (including foster or legal parents as necessary); (V
- Locating placement resources; B
- Arranging/conducting pre-placement visits; and ပ
- Developing an aftercare services plan â

NOTICE OF ADOPTED RULES

- responsibility shall be assumed by a person possessing at least a bachelor's degree in human services and one year of Rehabilitative transition linkage and aftercare services human services experience. 3)
- annual maximum units for rehabilitative services coordination shall not exceed 240 hours and such units are billed in 15 minute The е •
- The annual maximum units for rehabilitative transition linkage and aftercare services shall not exceed 40 hours and such units are billed in 15 minute increments. G

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Medicaid Community Mental Health Services Application Components Section 132.APPENDIX A

The following items are required as attachments to the application pursuant to Section 132.30(g):

- Detailed program description (including staff qualifications, dates and times of operations) for each service for which application is made. ij
- Utilization review plan pursuant to Section 132.95. ς.
- þe to A copy of a client record format including copies of all forms used. ٠ و
- accreditation letter or license and, if applicable, the report of If licensed or accredited, a copy of the applicant's most findings. 4
- pursuant to Section 132.90 as they relate to fire and safety for all local ordinances and Documentation of compliance with state and sites where Medicaid services are provided. S.
- all sites where Medicaid services are provided. (A statement from a local or municipal/county building inspector will meet this requirement.) Documentation of compliance from a licensed plumber and electrician for ٠,
- A copy of the applicant's financial audit for the last fiscal year if it is not on file with the Department or DCFS. 7
- Policy statements on: 8
- Third party payments (see Section 132.80(g)); ė,
- Written recommendation and clinical direction of services pursuant to Sections 132.115 and 132.145. ۵,
- the Medicaid community mental health services program and other entities which are necessary to maintain the program compliance financial arrangements between the applicant and other providers in business records which (e.g., payments received) (see Section 132.85); and How the applicant maintains ပံ
- Confidentiality of client records (see Section 132.85). ÷
- The most recent contract which the applicant has with the Department for mental health services or DCFS for child welfare or youth services. 6

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A staffing roster which demonstrates the applicant's capacity to provide services in accordance with this Part. 10.

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32. APPENDIX
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Mental Health Clinic Program Client Services Section 132.TABLE A

SERVICE	MINIMUM UNIT BILLABLE*	AVERAGE UNITS PER SPECIFIED PERIOD	ANNUAL MAXIMUM UNITS
Mental health assessment	15 min.	6 hours (per 6 months)	12 hours
<pre>Psychological assessment** (testing)</pre>		one assessment (per 12 months)	6 hours
Treatment plan (development and modification)	15 min.	one hour (per 90 days)	12 hours
Psychotropic medication prescription, review, and monitoring & training	15 min.	2 hours (per 30 days)	24 hours
Crisis intervention	15 min.	10 hours (per 30 days)	50 hours
Day treatment/intensive stabilization	1 hour	22 days (per 30 days)	176 hours
Day treatment/extended treatment and rehabilitation	1 day (4 hours)	22 days (per 30 days)	880 hours
Adult psychiatric treatment individual therapy (60 min av) 15 min. family therapy (120 min av) group therapy (90 min av)) 15 min.	4 hours 8 hours 6 hours (per 30 days)	36 hours 72 hours 54 hours
Children/adolescents psychiatric treatment individual therapy (60 min av) family therapy (120 min av) group therapy (90 min av)) 15 min.	8 hours 16 hours 12 hours (per 30 days)	96 hours 193 hours 144 hours

Billable to the nearest quarter hour, e.g. 55 minutes is billable to one hour or to the nearest hour for day treatment, e.g. at \$ of the day rate, if the client does not attend the typical full \$4 hour day which is billable at the all inclusive full day rate.

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Psychological assessment shall be billed at the rate established for mental health assessment. *

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DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF ADOPTED RULES

Rehabilitative Mental Health Services Section 132.TABLE B

	MINIMUM BILLABLE	MAXIMUM BILLABLE	MAXIMUM BILLABLE
SERVICE	UNIT	TIME/DAY	TIME/YEAR
Mental health assessment	15 min.	45 min.	3 hours
Mental health social history	15 min.		9 hours
Psychological assessment	15 min.	45 min.	3 hours
Psychological standardized testing	15 min.		9 hours
Treatment plan development and modification	15 min.		24 hours
Medication administration, monitoring, or training	15 min.		32 hours
Crisis intervention	15 min.		60 hours
Adult psychiatric treatment Individual therapy Family therapy Group therapy Individual counseling Family counseling Group counseling	15 min. 15 min. 15 min. 15 min. 15 min. 15 min.	45 min. 45 min.	60 hours 104 hours 196 hours 60 hours 104 hours
Children/adolescents psychiatric treatment Individual therapy Family therapy Group therapy Individual counseling Family counseling Group counseling	15 min. 15 min. 15 min. 15 min. 15 min. 15 min.	45 min. 45 min.	120 hours 192 hours 144 hours 120 hours 192 hours 144 hours
Rehabilitation day treatment Intensive stabilization Extended treatment, rehabilitation Psychosocial rehabilitation	1 hour 1 hour 1 hour	5 hours 5 hours 5 hours	176 hours 1056 hours 1056 hours
Individual/family social rehabilitation Community-based rehabilitation	15 min. 1 day		120 hours 365 days

NOTICE OF ADOPTED RULES

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DEPARTMENT OF MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES

NOTICE OF ADOPTED RULES

Section 132.TABLE C Family Intervention, Stabilization and Reunification Services	Stabilizat	ion and Reuni	lfication
SERVICE	MINIMUM BILLABLE UNIT	MAXIMUM BILLABLE TIME/DAY	MAXIMUM BILLABLE TIME/YEAR
Rehabilitative assessment	15 min.	45 min.	3 hours
Mental health social history	15 min.		9 hours
Psychological assessment	15 min.	45 min.	3 hours
Psychological standardized testing	15 min.		9 hours
Rehabilitative services plan development, review and modification	15 min.		24 hours
Rehabilitative counseling Individual Family Group	15 min. 15 min. 15 min.		60 hours 104 hours 156 hours
Rehabilitative crisis Intervention, stabilization Pre-hospitalization screening	15 min. 15 min.		60 hours
Rehabilitative stabilization Individual or group	15 min.		120 hours
Developmental rehabilitation Individual or group	15 min.		140 hours
Rehabilitation consultation, review	15 min.		32 hours
Rehabilitation services coordination	15 min.		240 hours
Rehabilitation transition linkage and aftercare	15 min.		40 hours

DEPARTMENT OF NUCLEAR SAFETY NOTICE OF ADOPTED AMENDMENT

- ACCREDITING PERSONS IN THE PRACTICE OF MEDICAL RADIATION TECHNOLOGY The Heading of the Part: 7
- 32 Ill. Adm. Code 401 Code Citation: 5
- Adopted Action: New Section New Section Amendment Amendment Amendment Amendment Amendment Amendment Section Number: œ . APPENDIX 401.APPENDIX 401.130 401.140 401.150401 5 3
- <u>Statutory Authority:</u> Implementing and authorized by Sections 5, 6, 7 and 36 of the Radiation Protection Act of 1990 (P.A. 87-604, effective September 18, 1991). 4
- June 2, 1992 Effective Date of Adopted Amendment: 2
- Does this rulemaking contain an automatic repeal date? No 9
- 욷 Do these adopted amendments contain incorporations by reference? ~
- May 29, 1992 Date Filed in Agency's Principal Office: 8
- Notice of Proposal Published in Illinois Register: 6
- January 24, 1992 (16 Ill. Reg. 1474)
- Has JCAR issued a Statement of Objections to these Adopted Amendments: No 10
- Based on comments <u>Differences between proposal and final version:</u> received, the following changes were made: 1
- question 3, the action for Section 401.160 has been changed from "Amendment" to "New Section". In the Notice Page, a)
- In Section 401.160(b), line 6, the phrase "to meet" has been changed to the phrase "toward meeting". a

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DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF ADOPTED AMENDMENT

- Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? No agreements between the Department and the Committee were necessary to resolve Committee questions concerning this rulemaking. A copy of the Agreement letter attached 12)
- Will these adopted amendments replace an emergency rule currently in effect? 13)
- ટ Are there any amendments pending on this Part? 14)
- technologists who perform mammography procedures. The training requirements are set forth in Section 401.160 and the list of requaired subjects is included in new Appendix C. The proposed Amendment also modifies the current rule: (1) in Section 401.70, by providing that the examination given by the American Registry of Clinical Radiography Technologists may be used to satisfy the examination requirement for medical radiography accreditation if it is passed after January 1, 1991; (2) in Section 401.110, by specifying how the Department will establish in Section 401.130, by deleting obsolete fees that were in effect prior to January 1, 1991; (4) in Section 401.140, by: (i) placing a ceiling on the amount of continuing education effort that must be satisfied by technologists who have allowed their accreditation to lapse; (ii) expiration dates for accreditation that is renewed before the expiration date of the previous accreditation and for accreditation that is renewed after the previous accreditation has lapsed or has been surrendered; (3) implement the statutory directives expressed during the first half of the 87th session of the General Assembly (P.A. 87-604) that the allowing technologists, under certain circumstances to obtain some of Department promulgate regulations establishing training requirements specific to mammography that must be satisfied by radiologic accreditation; (iii) permitting an individual to perform radiologic technology procedures, for up to 90 days, while an application for renewal is pending, provided that the applicant has demonstrated compliance with all requirements for renewal except the continuing education requirement; and (5) in Section 401.150, by deleting the reference to Podiatric Radiographic Assistant. their required continuing education after reinstatement of their This Amendment will Summary and Purpose of Adopted Amendments: 15)

DEPARTMENT OF NUCLEAR SAFETY NOTICE OF ADOPTED AMENDMENT information and questions regarding these adopted amendments shall be directed to: 16)

Senior Staff Attorney Department of Nuclear Safety 1035 Outer Park Drive Springfield, "Illinois 62704 (217) 785-9881 (voice) (217) 785-9900 (TDD) The full text of the Adopted amendments begins on the next page:

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DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF ADOPTED AMENDMENT(S)

TITLE 32: ENERGY

CHAPTER II: DEPARTMENT OF NUCLEAR SAFETY SUBCHAPTER b: RADIATION PROTECTION

ACCREDITING PERSONS IN THE PRACTICE OF MEDICAL RADIATION TECHNOLOGY PART 401

Procedures by Type of Limited for Radiographers Performing Additional Requirements Example Topics Directly Related to Radiologic Sciences Practice Requirement - Initial Licensure (Repealed) Suspension and Revocation of Accreditation Requirements for Renewal of Accreditation Minimum-Course-of-Education-(Repeated) Radiography Minimum Training Requirements Radiographers Performing Mammography Initial Issuance of Accreditation Application for Accreditation Categories of Accreditation Limited Diagnostic Duration of Accreditation Examination Requirements Acceptable Examinations Accreditation Mammography Approved Program Policy and Scope Civil Penalties Definitions Reciprocity Exemptions Fees **ي** ب APPENDIX APPEND1 X APPENDIX 401,140 401.170 401.70 401.100 401.110 401.120 401.130 401.150 401.160 401.50 401.60 401,90 401.10 401.20 401.30 401.40

Radiation Protection Act of 1990 (P.A. 87-604, effective September 18, 1991). AUTHORITY: Implementing and authorized by Sections 5, 6, 7 and 36

1987, for a maximum of 150 days; amended at 12 III. Reg. 7603, effective April 18, 1988; amended at 12 III. Reg. 18164, effective January 1, 1989; amended at 13 III. Reg. 15005, effective September 11, 1989; amended at 14 III. Reg. 15341, effective September 4, 1990; amended at 15 III. Reg. 7054, effective 150 days; amended at 9 Ill. Reg. 2499, effective February 13, 1985; amended at 10 Ill. Reg. 13259, effective July 28, 1986; amended at 10 Ill. Reg. 21086, effective January 1, 1987; amended at 11 III. Reg. 15623, effective September 11, 1987; Ethergency amendment at 11 III. Reg. 19797, effective November 24, SOURCE: Adopted at 7 Ill. Reg. 17318, effective January 1, 1984; Emergency amendment at 8 Ill. Reg. 17584, effective September 12, 1984, for a maximum of Reg. 16 amended ril 29, 1991; June 2, 1992 April

Section 401.70 Acceptable Examinations

NOTICE OF ADOPTED AMENDMENT(S)

- a) The Department shall accept for issuance of Active Status Accreditation examinations as identified by this Section. Accreditation shall be specific to the category of examination as specified in subsection (b) of this Section.
 - b) Examinations as appropriate to category of accreditation are as follows:
- Medical Radiography
- \underline{A} The American Registry of Radiologic Technologists (R) (A.R.R.T.) $\tau_{\underline{L}}$ Or

AGENCY NOTE: Graduation from an approved program as set forth in Section 401.80(a) is a prerequisite for sitting for the A.R.R.T. examination.

- A.R.C.R.T.) provided that the applicant passed the A.R.C.R.T. examination after January 1, 1991, and the applicant has graduated from an approved program as set forth in Section 401.80(a).
 - 2) Nuclear Medicine Technology
- The American Registry of Radiologic Technologists (N) (A.R.R.T.), the Nuclear Medicine Technology Certification Board (N.M.T.C.B.), the American Society of Clinical Pathologists (NM)
- 3) Radiation Therapy Technology
- The American Registry of Radiologic Technologists (T (A.R.R.T.).
 - 4) Chiropractic Radiography
- Antippearing management - ARMF); The Chiropractic Registry of Radiologic Technologists (ACRR); provided that the examination was administered after June 30, 1984.
- for accreditation in one or more areas of limited diagnostic radiography shall have passed a written examination on general radiography topics and a written or practical examination specific to shall be approved by and scheduled through the Department. The passing All practical examinations shall cover items prescribed by the Examinations in Limited Diagnostic Medical Radiography - Applicants type of limited accreditation sought. All written examinations score for written examinations shall be a scaled score of 75 percent. Practical examinations may be administered by a full-time faculty member of an approved program as defined in Section 401.80 or by a licensed practitioner, certified as a radiologist by Radiology, or the American Chiropractic Board of Radiology. Practical examinations shall be graded on a pass/fail basis on forms provided by the American Board of Radiology, the American Osteopathic Board of technologist who holds active accreditation in radiography and the Department. î
- d) For Active Status Accreditation, examinations by other certifying organizations shall be accepted upon written request to the Department, provided that the Department finds that the certifying organization has met the National Commission for Health Certifying

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Agencies (NCHCA) requirements. (Publication Title: Perspectives on Health Occupational Credentialing) Contract # 232-78-0187, dated September 30, 1979, DHHS Publication No. (HRA) 81-4, U.S. Government Printing Office, Washington, D.C. 20402.

(Source: Amended at 16 Ill. Reg. 9115 , effective

Section 401.110 Duration of Accreditation

- The duration of initial issuance of Active Status Accreditation, regardless of the category of medical radiation technology, shall be two (2) years. Active Status Accreditation shall be renewable for periods of two years in accordance with meeting the requirements in Section 401.140.
- b) The duration of Temporary Accreditation shall not exceed two years for the categories of Radiography, Nuclear Medicine Technology, or Radiation Therapy Technology and shall not exceed one year for Chiroparatic Radiography. Temporary Accreditation shall not be
- c) The duration of initial issuance of Conditional Accreditation Type I shall be two years and shall be renewable thereafter for periods of two years. Such renewal shall be based on a re-evaluation by the Department of a condition of community hardship and meeting the requirements of Section 401.140.
- d) The duration of initial issuance of Conditional Accreditation Type II shall be two years. This accreditation shall be renewable for periods of two years in accordance with meeting the requirements in Section 401.140. The renewed accreditation shall be specific to the procedures and equipment indicated in the most recent Statement of Assurance which has been presented to the Department in accordance with Section 401.100(d).
- e) The duration of initial issuance of accreditation in Limited Diagnostic Radiography shall be two years. This accreditation shall be renewable for periods of two years in accordance with meeting the requirements in Section 401.140.
- The expiration date of a renewed accreditation that has been renewed on or before the expiration of the previous accreditation shall be two years from the expiration date of the previous accreditation. For renewal of accreditation that has lapsed, or that has been surrendered, the expiration shall be two years from the last day of the month in which the application for renewal is processed.

(Source: Amended at 16 III. Reg. <u>9115</u>, effective June 2, 1992

Section 401.130 Fees

a) The fees for accreditation in all categories shall be non-refundable

NOTICE OF ADOPTED AMENDMENT(S)

and shall be as follows:

- For-application-filed-before-January-17-1991:
- Initial-Accreditation---Active,--Conditional--or--Temporary Statust
- \$30-00-per-application \$30-00-per-apptication Renewal-of-Accreditation---Active-and-Conditional-Status: H
- Por-applications-filed-on-or-after-January-ly-1991:
- Initial Accreditation Active, Conditional, Temporary or A<u>1</u>)
 - Limited Status:
- Renewal of Accreditation Active, Conditional, or Limited Status: B2)

\$40.00 per application

\$40.00 per application 3b) Examination fee for Limited Diagnostic Radiography Accreditation shall

be \$30.00.

The appropriate fees are to accompany the application when filing with An application is filed on the date that it is received by the Department or on the date that it is postmarked by the United States Postal Service, whichever is earlier. the Department. (ပြု ရှင်

9115 Reg. 111. 16 at June 2, 1992 (Source: Amended

Section 401.140 Requirements for Renewal of Accreditation

Prerequisites a)

- An individual must make application for renewal of accreditation not legally perform medical radiation technology without valid accreditation, or without the expressed pending. Such approval shall be limited to the applicant who meets all requirements for initial accreditation and requires additional time for the filling of continuing education records. accreditation. Accreditation shall lapse if not renewed within this time period. approval of the Department during such time as an application may this Section shall be interpreted to preclude an individual The duration of such approval shall not exceed 90 days. or before the expiration date of the from seeking the renewal of lapsed accreditation. individual may in
- Each applicant shall submit a complete and legible application with the fee for renewal of accreditation in accordance with Department acts to grant or deny renewal of accreditation. The Department will grant or deny renewal of accreditation within as the Section 401,130. Submission of an application for renewal hold the prior accreditation valid until such time ninety (90) days of receipt of application for renewal. 2)
 - Continuing Education Requirements q

category or status of accreditation sought to be renewed, must provide renewal of accreditation, regardless

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evidence of having participated in an approved program of continuing education as indicated below:

- category of medical radiation technology, applicable to each year elapsed since the most recent date of issuance of accreditation, The required effort in continuing education per year for each the expiration of the last years beyond accreditation, is as follows: not to exceed two
- Radiography
- 12 units 12 units 12 units Nuclear Medicine Technology B
 - Radiation Therapy Technology
- Chiropractic Radiography
 - Limited Diagnostic Radiography (C) (E)

6 units

- An 7
- surrenders his/her accreditation shall meet the requirements responsible for continuing education for the period beyond set forth in subsection (b)(l) but shall not the date when such accreditation was surrendered. A)
- can provide evidence that he/she has not been employed to perform radiation procedures in this State during periods of lapsed accreditation shall not be held responsible for for continuing education requirements accrued during the period for which such but shall be responsible the most recent accreditation was valid. for periods continuing education accreditation a
- accreditation and meets either (b)(2)(A) or (b)(2)(B) shall have provision in subsection (b)(2)(A) or (b)(2)(B) shall have completed 12 of the hours of continuing education required by subsection (b)(1) for renewal within one year preceding the application for renewal or within 90 days after the Department. Such approval by the Department shall be granted only for reasons of deficient continuing education. if approved by submission of the application, renewal of for applies ଧ
- 23) The continuing education effort may be averaged during the period Individual courses may be applicable to more than one category of The Department will base its approval on the relevance of the course work or training to the category or categories of current accreditation. In establishing relevancy, the Department will use standards such as are accepted by Verification of Involvement in Continuing Education (V.O.I.C.E.), Evidence of Continuing Education (E.C.E.), Continuing Medical Department will also accept relevant course work from accredited Education (C.M.E.), and Continuing Education Units (C.E.U.). to which the requirement applies and shall be prorated by colleges and universities to satisfy this requirement. accreditation.
- Credit for continuing education other than as indicated above shall be granted by the Department if the individual or activity sponsor seeks approval of the course or activity and the Department finds that the course or activity will be consistent with courses approved in accordance with Section--401:140(b)(1) 94)

NOTICE OF ADOPTED AMENDMENT(S)

subsection (b)(1).

contact hour (50 minutes) of lecture. Activity other than lecture shall be approved for credit by the Department based upon The basis for a unit of continuing education credit shall be the contact hour (50 minutes) of lecture. the standards of subsection (b) (23). 45)

In each category of accreditation the applicant for renewal shall have completed a minimum of 6 units of continuing education for accreditation, not to exceed two years beyond the expiration of the most recent accreditation, in continuing education in subject matter directly related to radiologic sciences in the applicant's requirement may be accomplished either in subject matter directly related to radiologic sciences or in subject matter directly each year elapsed since the most recent date of issuance The balance related to patient care in the radiologic environment. specific category of accreditation. (95

AGENCY NOTE: Applicants may refer to 401. Appendix B for examples subjects education of specifically related continuing category.

Nonrenewal of Accreditation ပ

possesses the necessary qualifications for accreditation, and that he/she has participated in an approved continuing education Department shall not renew an individual's accreditation if he/she fails to present satisfactory evidence that program in accordance with this Part. 7

individual meets these requirements, the Department shall, within accreditation, send the individual a Notice of Intent Not to deficiency and the individual's rights as set forth in this If the Department does not find satisfactory evidence that the ninety (90) days of receipt of the application for renewal This notice shall include the area(s) Renew Accreditation. 5)

The Department shall act upon such resubmission receipt of the Notice of Intent Not to Renew Accreditation, resubmit an application for renewal of accreditation which establish that the identified area(s) of deficiency have been met application shall hold the prior accreditation valid until the The individual may, within fifteen (15) days of the date provides additional information to the Department in order within thirty (30) days of receipt. Submission of such Department acts on the application. 3)

After receipt of a Notice of Intent Not to Renew Accreditation in accordance with subsections $\{\underline{c}\}(2)$ or $\{\underline{c}\}(3)$, the individual may request a hearing. Such request must be made within thirty (30) days of the date of receipt of the Notice of Intent Not to Renew Ill. Adm. Code 200, except that the applicant shall have the request for a hearing shall hold the prior accreditation valid The hearing shall be held in accordance with 32 burden of proof of establishing that he/she has met the necessary qualifications for renewal of accreditation. Submission of a Accreditation. 7

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DEPARTMENT OF NUCLEAR SAFETY

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NOTICE OF ADOPTED AMENDMENT(S)

the individual's receipt of a decision pursuant to the

days of receipt of a Notice of Intent Not to Renew Accreditation in accordance with subsections (c)(2) or (c)(3), the Department If the applicant does not request a hearing within thirty (30) shall issue a Notice of Nonrenewal. 2)

An individual's current credential shall be, invalid as of the subsection (c)(5) or a decision issued after a hearing in date of his/her receipt of a Notice of Nonrenewal pursuant accordance with subsection (c)(4) of-this-Section. (9

Such application shall be reviewed and processed in accordance with the requirements of this Section except that an individual may not legally apply ionizing radiation to human beings until and unless the Department has If an individual's accreditation is not renewed, he/she shall have the right at any time to submit an application for renewal acted to grant such application for renewal of accreditation. of accreditation. 7

effective 9115 Reg. 111. at 16 1992_) at Amended Inne

Section 401.150 Reciprocity

The Department shall accredit an out-of-state applicant provided that;

Chiropractic Radiographic Assistant or---Podiatric--Radiographic Assistant issued by another state or jurisdiction; and The applicant holds a current credential as a Medical Radiographer, Nuclear Medicine Technologist, Radiation Therapy Technologist or

jurisdiction which issued the credential afford the same or comparable credentialing standards as those afforded by the Illinois statute and procedures for credentialing in the state The standards and regulations; and (q

The applicant presents the credential to the Department; and

The applicant submits the appropriate application fee in accordance with Section 401.130. g G

Reg. 111. 16 June 2, 1992 (Source: Amended

Radiographers Performing Section 401.160 Additional Requirements for

Mammography

After September 18, 1992, in addition to meeting the accreditation uirements set forth in this Part, any medical radiographer who forms mammography shall have completed the required minimum initial 401.Appendix C prior to in training in mammography as identified performing mammography. requirements set a)

A medical radiographer who performs mammography procedures shall engage in continuing education directly related to mammography at the a

NOTICE OF ADOPTED AMENDMENT(S)

rate of 8 contact hours within each 24 month period after meeting the initial mammography training requirement. Subjects identified in 401. Appendix C shall be considered directly related to mammography and may be utilized toward meeting the continuing education requirements of Section 401.140(b).

C) Programs, courses or other activities intended to meet the requirement for initial mammography training, or continuing education in mammography, shall be approved by the Department.

d) Completion of initial mammography training, and continuing education in mammography, shall be verified to the Department.

AGENCY NOTE: For additional requirements for facilities who perform mammographic procedures see 32 Ill. Adm. Code 360.71.

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DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF ADOPTED AMENDMENT

Section 401.APPENDIX B Example Topics Directly Related to Radiologic Sciences

As referenced in Section 401.140(b)($\frac{56}{6}$), applicants may refer to this Appendix for subjects relating directly to radiologic sciences in completing the minimum requirements for continuing education.

RADIOGRAPHY	NUCLEAR MEDICINE	RADIATION THERAPY	LIMITED RADIOGRAPHY
Medical Ethics	Medical Ethics	Medical Ethics	Medical Ethics
Medical Terminology	Medical Terminology	Medical Terminology	Medical Terminology
Human Structure & Function	Human Structure & Function	Human Structure & Function	Human Structure & Function
Radiobiology	Radiobiology	Radiobiology	Radiobiology
Radiation Physics	Radiation Physics	Radiation Physics	Radiation Physic
Radiographic Pathology	Radiographic Pathology	Radiographic Pathology	Radiographic Pathology
Principles of Protection	Principles of Protection	Principles of Protection	Principles of Protection
Radiographic Procedures			Radiographic Procedures
Principles of Exposure	Principles of Exposure	Principles of Exposure	Principles of Exposure
Film Processing	Film Processing	Film Processing	Film Processing
Quality Assurance	Quality Assurance	Quality Assurance	Quality Assurance
Imaging Equipment	Imaging Equipment		Imaging Equipment
Introduction to Computer Applications in Radiography	Introduction to Computer Applications in Nuclear Medicine	Introduction to Computer Applications in Radiation Therapy	Introduction to Computer Applications in Radiography

RADIOGRAPHY	NUCLEAR MEDICINE	RADIATION THERAPY	LIMITED RADIOGRAPHY
Nuclear Physics	Nuclear Physics	Nuclear Physics	Nuclear Physics
Health Physics	Health Physics	Health Physics	Health Physics
Mammography	Instrumentation and Statistics		
		Radiation Oncology Technique	
	Biochemistry		
	Immunology		
		Dosimetry	
		Radiation Oncology	
	Radionuclide Therapy		
	Radiopharmacy		
	Radionuclide Chemistry		
		Oncology Pathology	

(Source: Amended at 16 Ill. Reg. 9115, effective June 2, 1992

DEPARTMENT OF NUCLEAR SAFET	NOTICE OF ADOPTED AMENDMENT
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Section 401.Appendix C Minimum Training Requirements for Radiographers Performing Mammography As referenced in Section 401.160, applicants may refer to this Appendix for subjects relating directly to mammography in completing the minimum requirements for continuing education.

Subject	Contact Hours of Instruction
:	
Anatomy and Physiology of the Breast	1 Hour
Mammographic Equipment and Technique	1 Hour
Mammographic Quality Control	2 Hours
Positioning Techniques for Mammography	2 Hours
Mammographic Film Evaluation	1 Hour
Special Procedures in Breast Imaging	1 Hour

(Source: Added at 16111. Reg. 9115, effective June 2, 1 992

NOTICE OF ADOPTED RULES

- The Heading of the Part: AMERICANS WITH DISABILITIES ACT GRIEVANCE PROCEDURE
- 2) Code Citation: 4 Ill. Adm. Code 175
- Adopted Action: New Section Section Section Section Section Section Section Section New New New New Vew /ew Section Number: 175.10 175.20 175.30 175.50 175.60 175.70 175.40 3
- 4) <u>Statutory Authority:</u> Implementing Title II, Subtitle A of the Americans With Disabilities Act of 1990 (42 U.S.C. 12131-12134), as specified in Title II regulations (28 CFR 35.107), and authorized by Section 4 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1991, ch. 127, par. 1004).
- 5) Effective Date of Adopted Rule: June 2, 1992
- 6) Does this rulemaking contain an automatic repeal date? No
- 7) Do these adopted rules contain incorporations by reference? No
- 8) Date Filed in Agency's Principal Office: May 29, 1992
- 9) Notice of Proposal Published in Illinois Register:
- February 7, 1992 (16 Ill. Reg. 2003)
- 10) Has JCAR issued a Statement of Objections to these Adopted Rules: No
- 11) Differences between proposal and final version: Based on comments received, the following changes were made:
- The revised Code Citation has been changed from "32 Ill. Adm. Code 210" to "4 Ill. Adm. Code 175."
- b) The Table of Contents has been changed to:

"TITLE 4: DISCRIMINATION PROCEDURES CHAPTER IV: DEPARTMENT OF NUCLEAR SAFETY PART 175 AMERICANS WITH DISABILITIES ACT GRIEVANCE PROCEDURE

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DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF ADOPTED RULES

- c) The Section numbers have been changed from "210" to 175" throughout the rule.
- d) In the Authority Note, the word "title" has been capitalized, and the statutory citation has been changed from "1989" to "1991".
- e) In Section 175.10, line 3, the acronym "(ADA)" has been moved and inserted immediately after the phrase "Americans With Disabilities Act" on line 1.
- f) In Section 210.20, the italics has been deleted from the definitions of "Disability" and "Qualified individual with a disability". In the definition of "Grievance" the Department has added a comma after the phrase "or receipt of the benefits of" on line 3.
- g) In Section 210.50 (d), line 3, the word "of" has been changed to the word "after".
- h) In Section 210.50 (e), line 5, the statutory citation has been changed from "1989" to "1991".
- i) In Section 210.70(a), line 1, the phrase "which include, but are not limited to" has been changed to the phrase "which includes, but is not limited to".
- Have all the changes agreed upon by the agency and JCAR been made as indicated in the agreement letter issued by JCAR? No agreements between the Department and the Committee were necessary to resolve Committee questions concerning this rulemaking. A copy of the Agreement letter attached.
- 13) Will these adopted rules replace an emergency rule currently in effect? No
- · 14) Are there any amendments pending on this Part? No
- 15) Summary and Purpose of Adopted Rules: This rule will establish, within the Department of Nuclear Safety, a procedure whereby qualified persons with disabilities may resolve allegations of denial of public services on the basis of disability. These procedures are required by the Americans With Disabilities Act of 1990.

NOTICE OF ADOPTED RULES

Information and questions regarding these adopted rules shall be directed to: 16)

Staff Attorney Department of Nuclear Safety 1035 Outer Park Drive Springfield, Illinois 62704 (217) 524-0770 (voice) (217) 785-9900 (TDD) Lyle Black

The full text of the Adopted Rules begins on the next page:

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DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF ADOPTED RULES

DISCRIMINATION PROCEDURES DEPARTMENT OF NUCLEAR SAFETY

PART 175 AMERICANS WITH DISABILITIES ACT GRIEVANCE PROCEDURE

Designated Coordinator Level Case-by-Case Resolution Accessibility Definitions Final Level Procedure Section 175.10 175.20 175.30 175.40 175.50 175.60 175.70 AUTHORITY: Implementing Title II, Subtitle A of the Americans With Disabilities Act of 1990 (42 U.S.C. 12131-12134), as specified in Title II regulations (28 CFR 35.107), and authorized by Section 4 of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1991, ch. 127, par. 1004).

9129, effective June 2, 1992 SOURCE: Adopted at 16 Ill. Reg.

Section 175.10 Purpose

- Grievance Procedure (Procedure) pursuant to the Americans With Disabilities Act of 1990 (42 U.S.C. 12101 et seq.), and specifically Section 35.107 of the Title II regulations (28 CFR 35.107) requiring that a grievance procedure be established to disabilities. Any individual destring to review the ADA or its regulations to understand the rights, privileges and remedies afforded by it, may do so by contacting the Designated Coordinator. This Part shall govern the Department of Nuclear Safety (Department) proceedings of any such grievance under the This Part establishes an Americans With Disabilities Act (ADA) a
- In general, the ADA requires that each program, service, and activity offered by the Department, when viewed in its entirety, be readily accessible to and usable by qualified individuals with disabilities. <u>a</u>

NOTICE OF ADOPTED RULES

with all individuals requesting ready access to programs, services and activities. The Department encourages supervisors of It is the intent of the Department to foster open communication programs, services and activities to respond to requests for modifications before they become grievances.

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Section 175.20 Definitions

grievance form provided by the Department in accordance with this "Complainant" is an individual with a disability who files a

"Designated Coordinator" is the person appointed by the Department Director to coordinate the Department's efforts to comply with and carry out its responsibilities under Title II of the ADA, Personnel Manager. The Personnel Manager can be contacted at the Department's central office located at 1035 Outer Park Drive, Springfield, Illinois 62704, or by telephone at (217) 785-9904 including investigation of grievances filed by complainants. Designated Coordinator for the Department is the Department's (voice) or (217) 785-9900 (TDD).

"Director" means the Director of the Department of Nuclear Safety.

"Disability" means, with respect to an individual, a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such impairment; or being regarded as having such an impairment.

disability who meets the essential eligibility requirements for participation in, or receipt of the benefits of, a program, activity or service offered by the Department, and who believes he or she has been excluded from participation in or denied the "Grievance" is any complaint under the ADA by an individual with a benefits of any program, service or activity of the Department, or has been subject to discrimination by the Department in violation

"Qualified individual with a disability" means an individual with rules, policies, or practices, the removal of architectural, communication, or transportation barriers, or the provision of auxiliary aids and services, meets the essential eligibility requirements for the receipt of services or the participation in a disability who, with or without reasonable modifications to programs or activities provided by the Department.

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF ADOPTED RULES

Section 175.30 Procedure

- established in Sections 210.40 and 210.50 of this Part, in the form and manner described, and within the specified time limits. Time limits established in this Part are in calendar days, unless otherwise stated, and may be extended by mutual agreement in Grievances shall be submitted in accordance with the procedures writing by the complainant and the reviewer at the Designated Coordinator and Final Levels. a a
- grievance or has accepted the last response given in the grievance A complainant's failure to submit a grievance, or to submit or appeal it to the next level of procedure, within the specified time limits, shall mean that the complainant has withdrawn the procedure.
- The Department shall, upon being informed of an individual's desire to file a formal grievance, instruct the individual how to receive a copy of this procedure and the grievance form. ပ

Section 175.40 Designated Coordinator Level

- If an individual desires to file a formal written grievance, the individual shall promptly, but no later than 180 days after the alleged exclusion, denial, or discrimination, submit the grievance to the Designated Coordinator in writing on the grievance form prescribed by the Department for that purpose. a
- assistance to the complainant in completing the grievance form. Upon request by the complainant, the Department shall provide <u>a</u>
- provide a written response to the complainant and a copy thereof receipt of the grievance form, the Designated Coordinator shall The Designated Coordinator, or his/her representative, shall investigate the grievance and shall make reasonable efforts to resolve the grievance. Within ten (10) business days after to the Director. ၁

Section 175.50 Final Level

If the grievance has not been resolved at the Designated Coordinator Level to the satisfaction of the complainant, the complainant may, within five (5) days after receipt by the complainant of the Designated Coordinator's response, submit a copy of the grievance form and Designated Coordinator's written response to the Director of the Department for final review. The a

NOTICE OF ADOPTED RULES

complainant shall submit these documents to the Director, together with a short written statement explaining the reason(s) for dissatisfaction with the Designated Coordinator's written response.

- the Complainant shall be afforded an opportunity to appear before the Director or the Director's designee. The complainant shall have a right to appoint a representative to appear on behalf of the complainant. The Director or designee shall review the Designated Coordinator's written response and may conduct interviews and seek advice as the Director or designee deems appropriate.
- c) If the Director appoints a designee for the procedure under subsection (b) above, the designee shall present both his/her findings and the written response of the Designated Coordinator to the Director.
- d) The Director shall approve, disapprove or modify the recommendation(s) of the Designated Coordinator. Within thirty (30) days after receiving the statement of dissatisfaction under subsection (a) above, the Director shall render a decision thereon in writing, stating the basis for the decision and shall cause a copy of the decision to be served on the complainant and Designated Coordinator. If the Director disapproves or modifies the recommendation(s) contained in the written decision reasons for such disapproval or modification. The Director's decision shall be final.
- Coordinator's response, the statement of reasons for dissatisfaction, the findings of the Director's designee, if any, and the Director's written decision in accordance with the State Records Act (III. Rev. Stat. 1991, ch. 116, par. 43.3 et seq.) or as otherwise required by law.

Section 175.60 Accessibility

The Department shall ensure that all stages of the grievance procedure are readily accessible to and usable by individuals with disabilities.

ILLINOIS REGISTER

DEPARTMENT OF NUCLEAR SAFETY

NOTICE OF ADOPTED RULES

Section 175.70 Case-by-Case Resolution

- a) Each grievance involves a unique set of factors which includes, but is not limited to:
- the specific nature of the disability;
- the essential eligibility requirements, the benefits to be derived, and the nature of the service, program or activity at issue;
- the health and safety of others; and
- 4) whether or not an accommodation would constitute a fundamental alteration to the program, service or activity or undue hardship on the Department.
- b) Accordingly, termination of a grievance at any level, whether through the granting of relief or otherwise, shall not constitute a precedent on which any other complainants should rely.

ILLIINOIS HOUSING DEVELOPMENT AUTHORITY

NOTICE OF MODIFICATION TO EMERGENCY AMENDMENT IN RESPONSE TO AN OBJECTION OF THE JOINT COMMITTEE ON ADMINISTRATIVE RULES

- 1) Heading of the Part: Low-Income Housing Tax Credit Allocation
- 2) Code Citation: 47 Ill.Adm.Code 350
- 3) Section Number: 350.213
- 4) Notice of Emergency Amendment published in the Illinois Register:

April 3, 1992 16 Ill. Reg. 5369

5) JCAR Statement of Objection to Emergency Amendment published in the Illinois Register:

May 29, 1992 22 Ill. Reg. 8254

6) Date agency submitted this modification to JCAR for approval:

June 1, 1992

7) Summary of Action Taken by the Agency: In response to the Joint Committee on Administrative Rules, the Illinois Housing Development Authority agreed to change the original effective date of this rulemaking from March 3, 1992 to March 24, 1992, which was the date the Secretary of State, Administrative Code Division, accepted this rulemaking for filing.

ILLINOIS REGISTER

DEPARTMENT OF PUBLIC AID

REQUEST FOR CORRECTION

- 1) Rule Affected: Medical Payment (89 Ill. Adm. Code 140)
- 2) Publication of Rulemaking Requiring Correction:
 Amendments to Section 140.569 which were proposed on November 8, 1991 (15
 111. Reg. 15933) were adopted effective March 20, 1992. The notice of
 adopted amendments was published on April 17, 1992 (16 Ill. Reg. 6408).
 The published and filed texts of the adopted amendments failed to include
 amendments to Section 140.569 which were adopted effective November 22,
 1991, and published on December 6, 1991 (15 Ill. Reg. 1773).
- 3) Agency Representative: Questions or comments concerning this request for correction may be directed to Kenneth E. Mitchell, Chief, Bureau of Rules and Regulations, Illinois Department of Public Aid, 100 South Grand Avenue East, Third

Floor, Springfield, Illinois 62762. He may be contacted by telephone at

4) Reason Certificate of Correction Is Requested: These corrections are "omissions . . . that create unintentional discrepencies between adopted rule text and text previously published in the Illinois Register" as provided at 1 Ill. Adm. Code 245.110(a) and Section 7.01(b) of the Illinois Administrative Procedure Act (Ill. Rev. Stat. 1991, ch. 127, par. 1007.01(b)). The published and filed texts of Section 140.569 adopted effective March 20, 1992, failed to include previous amendments to Section 140.569 which were adopted effective November 22, 1991. This error created the unintentional discrepencies.

- 5) Effect on the Affected Public:
- a) Public interest to be served: This correction will facilitate public access to the properly adopted text of the rules.
- b) Will any hardship be created for the affected public? No.
- c) Measures taken and to be taken by the agency to make the corrections known to the public: The Department will distribute copies of the corrected Section to the affected public.
- the Recommended Date: March 20, 1992. The effective date of the two sets of amendments will not be affected by the correction, since both sets of amendments were properly adopted effective November 22, 1991, and March 20, 1992, respectively. The inadvertant failure to include the first set of amendments in the text of the subsequent amendments will not affect the effective date. On that basis, the corrected text reflects the amendments as effective March 20, 1992.

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DEPARTMENT OF PUBLIC AID

REQUEST FOR CORRECTION

- 7) Any person who wishes to comment on the request should contact the Joint Committee on Administrative Rules at the address or phone numbers below. However, commenters should be aware that the Joint Committee, in accordance with the expedited nature of this process, will be taking action on this issue as soon as possible.

 Joint Committee on Administrative Rules
 - Joint Committee on Administrative Rules 509 South Sixth Street, Room 500 Springfield, Illinois 62701

FAX: 217/524-0567

217/785-2254

8) The full text of the Section, indicating the requested corrections. follows:

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DEPARTMENT OF PUBLIC AID

REQUEST FOR CORRECTION

Section 140.569 Clients With Exceptional Care Needs

- a) Exceptional Care Program
- 1) Pursuant to Section 5-5A of the Illinois Public Aid Code (Ill. Rev. Stat. 1989, ch. 23, par. 5-5A), the Department may make payments to nursing facilities which substantially meet licensure and certification requirements as may be prescribed by the Department of Public Health. For purposes of this Section, substantial compliance shall mean, eempianee-with-eligibility standards required-ef-previders-under-the-Department-s-QUIP pregram.-Section-140.525(b).
- A) facility does not have Type A violation(s);
- B) facility is currently enrolled in the Medical Assistance Program:
- C) facility is licensed by the Department of Public Health;
- D) facility does not have a conditional license;
- E) facility must provide reasonable access to Medicaid patients. Access will be considered reasonable when:
- i) Medicaid recipients constitute at least 25% of the facility's average daily census; or
- ii) the proportion of Medicaid recipients in the census has increased at least two percentage points over the previous year; or
- iii) the facility can demonstrate that it admits patients without regard to income or Medicaid eligibility or to some other criteria which in essence prioritize admissions on the basis of financial resources. The basis for determining priority of admission must be expressed in policy. Records documenting consistent application of the policy must be maintained.
- E) facility meets at least 92% of patient needs based on the last IOC assessment conducted.
- The Department may, but is not required to, enter into contracts with facilities offering exceptional medical services, referred to herein as Providers.

REQUEST FOR CORRECTION

Exceptional medical care is defined as the level of medical care care for physician, nurse and ancillary specialist services with care placement the hospital must be entitled to receive Medicaid Beginning July 1, 1991, this may apply to Medicaid patients who reimbursement as the primary source of payment for this person. residents transitioning from Medicare to Medicaid while in the nursing facility. This includes but is not limited to persons persons. In order for a person to be assessed for exceptional required by persons who require a multi-disciplinary level of supplies that have been determined to be a medical necessity. are being discharged from the hospital or Medicaid eligible exceptional costs related to extraordinary equipment and/or with acquired immune deficiency syndrome (AIDS) or related condition, head-injured persons, and ventilator dependent Section 140.569(a) (continued) 3

separate types of care. In determining the rate of payment to a Providers and enter into a contract with Providers. The rate of The Department shall negotiate with nursing home previders payment will be reasonable and adequate to meet the costs Providers may negotiate separate facility wide rates for incurred by the facilities providing exceptional care. facility, the Department shall take into account cost information submitted by the facility. 4

Exceptional Care Contract Requirements P)

services only if the Provider agrees to the following conditions: Department may enter into a contract for exceptional care The

- related to the care of the exceptional care residents, reporting them in the ancillary section of the Department Long Term Care The Provider will maintain separate records regarding costs Facility Cost Reports. 7
- provide exceptional care as documented by Department of Public The facility must demonstrate the capacity and capability to Health and Department of Public Aid records. ?
- The Provider must maintain and provide documentation demonstrating: 3)
- to staffing requirements as set out in subsection Adherence (c) P
- Adherence to staff training requirements as set out in B

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DEPARTMENT OF PUBLIC AID

REQUEST FOR CORRECTION

Section 140.569(b)(3)(B) (continued)

subsection (d);

- Validity of written agreements as required in subsection (e) ΰ
- Presence of emergency policy and procedures as set out in subsection (f); â
- Medical condition of the resident; and â
- Care, treatments and services provided to the resident. <u>н</u>
- The Provider must have and maintain physical plant adaptations to accommodate the necessary equipment. 4
- The Provider must have and maintain an emergency electrical backup system. 2)

Exceptional Care Staffing Requirements G

Staffing requirements for facilities providing exceptional care include:

- week (as required by the Department of Public Health and set out review of the individual exceptional care clients' needs and/or the exceptional care needs relative to the category of services appropriate). Additional RN staff may be determined necessary A minimum of one RN on duty on the day shift, seven days per by the Department of Public Aid, based on the Department's in 77 Ill. Adm. Code 300.1240 or 250,910(e) and (f)(1) as being contracted for. a
- the Department of Public Health and set out in 77 Ill. Adm. Code 300.1230 and 300.1240 or 250.910(e) and (f)(1) as appropriate), on duty, with an RN on call, if not on duty on the evening and A minimum of the required number of LPM staff (as required by night shifts, seven days per week; and 7
- esidents or residents requiring respiratory therapy services. facility, for those facilities serving ventilator dependent A certified respiratory therapy technician or registered respiratory therapist, on staff or on contract with the <u>=</u>
- Training requirements for facilities providing exceptional care for ventilator dependent residents include: q

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DEPARTMENT OF PUBLIC AID

REQUEST FOR CORRECTION

Section 140.569(d) (continued)

- has successfully completed a course in the care of ventilator dependent individuals and the use of ventilators. conducted and documented by a certified respiratory therapy technician or registered respiratory therapist (as certified/registered by the Department of Professional Regulation) or a qualified registered nurse who has at least one year experience in the care of ventilator dependent persons, and
- documented inservice training in ventilator care prior to providing such care. Inservice training must be conducted at least annually by a certified respiratory therapy technician or registered respiratory therapist (as certified/registered by the Department of Professional Regulation) or a qualified registered nurse who has at least one year experience in the care of venilator dependent persons. Inservice training documentation shall include name and qualification of the inservice director, duration of presentation of all participants.

e) Exceptional Care Agreement Requirements

The Provider must have a valid written agreement with:

- A medical equipment and supply provider which must include a service contract for ventilator equipment when accepting ventilator dependent residents;
- 2) A local emergency transportation provider;
- A local hospital capable of providing the necessary care for equipment dependent residents, when appropriate; and
- 4) A certified respiratory therapy technician or registered respiratory therapist, (unless a respiratory therapist is on staff within the facility) when accepting ventilator dependent residents or residents requiring respiratory therapy services.
- f) Exceptional Care Emergency Policy and Procedures Requirements

The Provider must have specific written policies and procedures addressing emergency needs for residents requiring exceptional care.

g) Accessibility to Records

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DEPARTMENT OF PUBLIC AID

REQUEST FOR CORRECTION

Section 140.569(g) (continued)

The Provider must make accessible to IDPA and/or IDPH all facility, resident and other records necessary to determine that the needs of the resident are being met and to determine the appropriateness of exceptional care services.

h) Contract Negotiations

- A Provider shall notify the Department of its interest in participating in the Exceptional Care Program in writing by certified or registered mail, return receipt requested.
- 2) Negotiations between the Provider and the Department shall be conducted solely on an individual facility basis. Multiple facility negotiations shall not be permitted.
- 3) Prior to the beginning of negotiations, the Provider shall submit to the Department a completed Exceptional Care Data Sheet. The Department shall furnish such Data Sheet. The Exceptional Care Data Sheet shall require:
- A) Identification of the types, quantities and costs of services which the Provider intends to offer;
- A staffing plan for the area of the facility serving exceptional care residents; and
- C) Documentation of the qualifications of staff serving exceptional care residents.
- 4) The Department shall provide each Provider which has notified the Department of its interest in participation in the Exceptional Care Program with a copy of the proposed contract provisions by mailing such proposed contract provisions to the provider. Each contract shall be for a period of one year.

i) Renewal/Nonrenewal of Exceptional Care Contracts

- 1) Providers desirous of renewing exceptional care contracts must contact the Department in writing sixty (60) days prior to the expiration date of the contract to express their intent to renew the contract.
- Upon receipt of the Providers' intent to renew their contract, the Department shall open negotiations as set forth in subsection (h).

REQUEST FOR CORRECTION

Section 140.569(i) (continued)

- 3) Providers desiring to terminate or not renew their contract shall notify the Department sixty (60) days prior to the date of termination or contract expiration. Payment for new admissions at an exceptional care rate will not be made to those Providers who do not have a valid exceptional care contract. Payment for exceptional care residents in facilities which terminate or do not renew their contracts will remain at the previous exceptional care rate until such time as the resident no longer requires exceptional care as determined by the Department's utilization review (see Contract Monitoring 2 and 3) or the resident is discharged.
- 4) It is the responsibility of a nursing home Provider to effect appropriate discharge planning for exceptional care residents when terminating or not renewing its contract. The Department agrees to assist Providers with any information available regarding appropriate placement settings.

Determining eligibility for exceptional care payment.

- 1) A person being discharged from a hospital must be approved by an authorized Department representative prior to placement in a facility to be eligible for exceptional care payment. Medicald eligible residents transitioning from Medicare to Medicaid while in the nursing facility must be approved by an authorized Department representative approximately 30 days prior to the date Medicaid payment will begin.
- exceptional care placement the cost of the person's care must be at least 25% more than the proposed admitting facility's per diem rate (capital, support and nursing components). Eligible items which may be used in computing the cost of the person's care include nursing services costs, therapy services costs, and medical equipment and supply costs. Computations for determining cost of care shall be based upon maximum allowable costs for service equipment and supplies and HSA wage rates for the proposed admitting facility as determined by the Department.
- k) Provision for Patients for which a Long Term Care Placement is Unavailable

In the event placement for a patient in need of exceptional care services or skilled nursing services cannot be located, the Department shall approve payment to the hospital in which the patient

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DEPARTMENT OF PUBLIC AID

REQUEST FOR CORRECTION

Section 140.569(k) (continued)

is receiving services. The rate of payment to the hospital shall not exceed the average statewide long term care facility per diem rate for the level of services provided.

1) Contract Monitoring

- 1) All utilization controls applied to exceptional care by the Department in accordance with the approved plan for medical services under Section 5-2 of the Illinois Public Aid Code (Ill. Rev. Stat. 1989, ch. 23, par. 5-2), and Title XIX of the Federal Social Security Act (42 U.S.C. 1396a) shall continue to apply to exceptional care provided under the Exceptional Care Program (Ill. Rev. Stat. 1989, ch. 111 1/2 par. 6503-5; Section 3-5 of the Health Finance Reform Act).
- 2) The Department shall provide for a program of delegated utilization review and quality assurance. The Department may contract with Medical Peer Review organizations to provide utilization review and quality assurance under any contract negotiated for exceptional care.
- 3) The Department shall review exceptional care residents' utilization of services every ninety (90) days. This review may be waived by Department Exceptional Care staff if at least 3 previous assessments show that a resident's condition has stabilized. Department Exceptional Care staff will maintain contact with the long term care facility regarding the resident's condition during the time period the assessment is walved.
- 4) In the event that it is determined that the resident is no longer in need of exceptional care services, the Department shall reduce the rate of payment to the Provider to the facility's standard Medicaid per diem rate.

(Source: Amended at 16 Ill. Reg. 6408, effective March 20, 1992)

NOTICE OF PUBLIC HEARING ON PROPOSED AMENDMENTS

Medical Payment Heading of the Part:

- 89 Ill. Adm. Code 140 Code Citation: 5
- May 15, 1992 (16 Ill. Reg. 7576) Register Citation to Notice of Proposed Amendments: 3
- Date, Time and Location of Public Hearing: 4

Third Floor Conference Room 201 South Grand Avenue East Prescott E. Bloom Building 10:00 A.M. to 11:30 A.M. Wednesday, July 15, 1992 Springfield, Illinois

Other Pertinent Information: 2)

from the Illinois Health Care Association. The public hearing will be for the sole purpose of gathering public comment on the proposed amendments to The Department is scheduling this public hearing in response to a request consistent with federal requirements and the requirements imposed by the readmission requirements for long term care facilities. The proposed Section 140.700. These amendments address transfer, discharge and amendments are intended to insure that the Department's rules are Department of Public Health. Persons interested in presenting testimony are advised that the Department will adhere to the following procedures in the conduct of the hearing.

- Each person presenting oral testimony shall provide to the hearing officer a written (preferably typed) copy of such testimony at the time the oral testimony is presented. No oral testimony will be accepted without a written copy of the testimony being provided. ;
- Each person presenting oral testimony will be limited to fifteen minutes for the presentation of such testimony. 5
- No person will be recognized to speak for a second time until all persons wishing to testify have done so. 3.
- All testimony shall conclude at the specified time except that an individual presenting testimony at that time shall be allowed to complete the presentation. 4.

ILLINOIS REGISTER

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JOINT COMMITTEE ON ADMINISTRATIVE RULES STRATTON OFFICE BUILDING SPRINGFIELD, ILLINOIS JUNE 16, 1992 ROOM A-1 10:00 A.M

to a proposed rule, they should submit written comments to the Office of the state agencies to testify orally on any rule under consideration at Committee It is the policy of the Committee to allow only representatives of hearings. If members of the public wish to express their views with respect Joint Committee on Administrative Rules at the following address:

Joint Committee on Administrative Rules 509 South Sixth Street Springfield, Illinois Suite 500

AGENDA

- Approval of May 12, 1992 Minutes
- Review of Proposed Agency Rulemaking

Agriculture

- -First Notice Published: 16 Ill Reg 3618 3/13/92 -Expiration of Second Notice Period: 6/18/92 Animal Control Act (8 Ill Adm Code 30) ≓
- Livestock Auction Markets (8 III Adm Code 40)
 -First Notice Published: 16 III Reg 3673 3/13/92 -Expiration of Second Notice Published: 6/18/92 ς.
- Illinois Dead Animal Disposal Act (8 III Adm Code 90) -First Notice Published: 16 III Reg 3653 3/13/92 -Expiration of Second Notice Period: 6/18/92 ო
- Hatcheries, Poultry Flocks, and Produce Thereof (8 Ill Adm Code -First Notice Published: 16 Ill Reg 3646 - 3/13/92 -Expiration of Second Notice Period: 6/22/92 4
- -First Notice Published: 16 Ill Reg 3635 3/13/92 Expiration of Second Notice Period: 6/22/92 Diseased Animals (8 Ill Adm Code 85) . 2
- Swine Disease Control and Eradication Act (8 III Adm Code 105)
 -First Notice Published: 16 III Reg 3680 3/13/92
 -Expiration of Second Notice Period: 6/25/92 .

- 7. Illinois Pseudorabies Control Act (8 III Adm Code 115) -First Notice Published: 16 III Reg 3661 - 3/13/92 -Expiration of Second Notice Period: 6/25/92
- 8. Animal Diagnostic Laboratory Act (8 III Adm Code 110) -First Notice Published: 16 III Reg 3624 3/13/92 -Expiration of Second Notice Period: 6/25/92
- Americans With Disabilities Act Grievance Procedure (4 III Adm Code 550)
 First Notice Published: 16 III Reg 5097 4/3/92
 Expiration of Second Notice Period: 7/3/92

Alcohollsm and Substance Abuse

10. Americans With Disabilities Act Grievance Procedure (4 III Adm Code 500)
-First Notice Published: 16 III Reg 2721 - 2/21/92
-Expiration of Second Notice Period: 7/6/92

Capital Development Board

11. Americans With Disabilities Act Grievance Procedure (4 III Adm Code 725)
First Notice Published: 16 III Reg 3689 - 3/13/92
Expiration of Second Notice Period: 6/22/92

Central Management Services

- 12. General Provisions (80 III Adm Code 304)
 -First Notice Published: 16 III Reg 334 1/10/92
 -Expiration of Second Notice Period: 7/10/92
- Solicitation for Charitable Payroll Deductions (80 Ill Adm Code 2650)
 First Notice Published: 16 Ill Reg 3235 3/6/92
 Expiration of Second Notice Period: 7/3/92

Commerce Commission

14. Procedures for Gas, Electric, Water and Sanitary Sewer Utilities Governing Eligibility for Services, Deposits, Payment Practices and Discontinuance of Service (G.O. #172) (83 III Adm Code 280)
-First Notice Published: 15 III Reg 9801 - 7/5/91
-Expiration of Second Notice Period: 6/19/92

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JOINT COMMITTEE ON ADMINISTRATIVE RULES

AGENDA

- Conversion of Contract to Common Authority (92 III Adm Code 1309)
 First Notice Published: 16 III Reg 3238 3/6/92
 Expiration of Second Notice Period: 7/13/92
- 16. Americans With Disabilities Act Grievance Procedure (4 Ill Adm Code 400)
 First Notice Published: 16 Ill Reg 5133 4/3/92
 Expiration of Second Notice Period: 7/16/92

Commissioner of Banks and Trust Companies

- 17. Administration of Assets Obtained in Collection of a Debt (38 III Adm Code 354)
 First Notice Published: 16 III Reg 5395 4/10/92
 Expiration of Second Notice Period: 7/9/92
- Acquisition of Former Main Banking Premises or Branches of Eligible Depository Institutions (38 III Adm Code 307)
 First Notice Published: 16 III Reg 5391 - 4/10/92
 Expiration of Second Notice Period: 7/9/92

Conservation

- Falconry and the Captive Propagation of Raptors (17 Ill Adm Code 1590)
 First Notice Dublished: 16 Ill Box 4122 - 2/20/92
 - -First Notice Published: 16 III Reg 4132 3/20/92 -Expiration of Second Notice Period: 6/22/92
- 20. Urban and Community Forestry Grant Program (17 III Adm Code 1538)
 -First Notice Published: 16 III, Reg 4148 3/20/92
 -Expiration of Second Notice Period: 6/22/92
- Commercial Fishing in Lake Michigan (17 III Adm Code 850)
 First Notice Published: 16 III Reg 4616 3/27/92
 Expiration of Second Notice Period: 6/25/92
- Squirrel Hunting (17 III Adm Code 690)
 First Notice Published: 16 III Reg 5157 4/3/92
 Expiration of Second Notice Period: 7/2/92
- 23. Dove Hunting (17 III Adm Code 730)
 -First Notice Published: 16 III Reg 5143 4/3/92
 -Expiration of Second Notice Period: 7/2/92

AGENDA

- 24. General Hunting and Trapping on Department-Owned or -Managed Sites (17 III Adm Code 510)
 -First Notice Published: 16 III Reg 5436 4/10/92
 -Expiration of Second Notice Period: 7/13/92
- Muskrat, Mink, Raccoon, Opossum, Striped Skunk, Weasel, Red Fox, Gray Fox, Coyote, Beaver and Woodchuck (Groundhog)
 Trapping (17 III Adm Code 570)
 -First Notice Published: 16 III Reg 5443 4/10/92

 -Expiration of Second Notice Period: 7/13/92
- 26. Raccoon, Opossum, Striped Skunk, Red Fox, Gray Fox, Coyote and Woodchuck (Groundhog) Hunting (17 III Adm Code 550)
 First Notice Published: 16 III Reg 5454 4/10/92
 Expiration of Second Notice Period: 7/13/92
- 27. The Taking of Wild Turkeys Fall Archery Season (17 III Adm Code 720)
 -First Notice Published: 16 III Reg 5466 4/10/92
 -Expiration of Second Notice Period: 7/13/92
- The Taking of Wild Turkeys Fall Gun Season (17 III Adm Code 715)
 First Notice Published: 16 III Reg 5475 4/10/92

7/13/92

Expiration of Second Notice Period:

- White-Tailed Deer Hunting by Use of Firearms (17 III Adm Code 650)
 First Notice Published: 16 III Reg 5501 4/10/92
- -Expiration of Second Notice Period: 7/13/92

 30. White-Tailed Deer Hunting Season by Use of Muzzeling Loading Rifles (17 III Adm Code 660)

 -First Notice Published: 16 III Reg 5525 4/10/92

 -Expiration of Second Notice Period: 7/13/92
- Woodcock, Snipe, Rail and Teal Hunting (17 III Adm Code 740)
 First Notice Published: 16 III Reg 5540 4/10/92
 Expiration of Second Notice Period: 7/13/92
- 32. Dog Training on Non-Department Owned or -Managed Lands (17 III Adm Code 960)
 -First Notice Published: 16 III Reg 5433 4/10/92
 - -Expiration of Second Notice Period: 7/13/92
- Dog Training on Department-Owned or -Managed Sites (17 III Adm Code 950)
 -First Notice Published: 16 III Reg 5429 4/10/92
 -Expiration of Second Notice Period: 7/13/92

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JOINT COMMITTEE ON ADMINISTRATIVE RULES

AGENDA

34. White-Tailed Deer Hunting by Use of Bow and Arrow (17 III Adm Code 670)
-First Notice Published: 16 III Reg 5482 - 4/10/92
-Expiration of Second Notice Period: 7/16/92

Corrections

- 35. Discipline and Grievances (20 III Adm Code 504)
 -First Notice Published: 16 III Reg 3715 3/13/92
 -Expiration of Second Notice Period: 6/22/92
- 36. Americans With Disabilities Act Grievance Procedure (4 III Adm Code 475)
 -First Notice Published: 16 III Reg 3707 3/13/92
 -Expiration of Second Notice Period: 6/22/92
- 37. Rights and Privileges (20 III Adm Code 525)
 -First Notice Published: 16 III Reg 5166 3/20/92
 -Expiration of Second Notice Period: 7/3/92
- 38. School District #428 (20 III Adm Code 405)
 -First Notice Published: 16 III Reg 5176 3/20/92
 -Expiration of Second Notice Period: 7/3/92

Employment Security

39. Employment (56 III Adm Code 2732)
-First Notice Published: 16 III Reg 785 - 1/17/92
-Expiration of Second Notice Period: 6/29/92

Housing Development Authority

Low-Income Housing Development Authority (47 III Adm Code 350)
 -First Notice Published: 16 III Reg 5185 - 4/3/92
 -Expiration of Second Notice Period: 7/15/92

Mines and Minerals

- 41. Surface Installation Health and Safety (62 III Adm Code 220)
 -First Notice Published: 16 III Reg 3316 3/6/92
 -Expiration of Second Notice Period: 6/18/92
- 42. The Illinois Explosives Act (62 Ill Adm Code 200)
 -First Notice Published: 16 Ill Reg 3267 3/6/92
 -Expiration of Second Notice Period: 6/22/92

Nuclear Safety

- Status Signals for Nuclear Power Reactors (32 III Adm Code 504)
 First Notice Published: 16 III Reg 4163 3/20/92
 Expiration of Second Notice Period: 6/24/92
- 44. Notices, Instructions and Reports to Workers: Inspections (32 III Adm Code 400)
 First Notice Published: 16 III Reg 2739 2/21/92
 Expiration of Second Notice Period: 6/26/92
- 45. Fees for Radioactive Material Licenses (32 III Adm Code 331)
 -First Notice Published: 16 III Reg 2984 2/28/92
 -Expiration of Second Notice Period: 6/26/92
- 46. Standards for Protection Against Radiation (32 III Adm Code 340)
 First Notice Published: 16 III Reg 2746 2/21/92
 Expiration of Second Notice Period: 6/26/92

Department of Professional Regulation

47. The Illinois Landscape Architecture Act of 1989 (68 Ill Adm Code 1275)
First Notice Published: 16 Ill Reg 5741 - 4/10/92
Expiration of Second Notice Period: 7/13/92

Public Aid

- 48. Aid to Families With Dependent Children (89 III Adm Code 112.110)
 -First Notice Published: 15 III Reg 16596 11/15/91
 -Expiration of Second Notice Period: 6/22/92
- Aid to Families with Dependent Children (89 III Adm Code 112.400)
 -First Notice Published: 15 III Reg 16596 11/15/91
 -Expiration of Second Notice Period: 6/22/92
- 50. Medical Assistance Programs (89 III Adm Code 120)
 -First Notice Published: 15 III Reg 16625 11/15/91
 -Expiration of Second Notice Period: 6/22/92
- 51. Special Eligibility Groups (89 III Adm Code 118)
 -First Notice Published: 15 III Reg 17040 12/2/91
 -Expiration of Second Notice Period: 6/22/92
- 52. Assistance Standards (89 III Adm Code 111)
 -First Notice Published: 15 III Reg 16851 11/22/91
 -Expiration of Second Notice Period: 6/22/92

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JOINT COMMITTEE ON ADMINISTRATIVE RULES

ACEND/

- 53. Medical Payment (89 III Adm Code 140)
 -First Notice Published: 16 III Reg 1492 1/24/92
 -Expiration of Second Notice Period: 6/22/92
- 54. Medical Payment (89 III Adm Code 140)
 -First Notice Published: 16 III Reg 3045 2/28/92
 -Expiration of Second Notice Period: 6/22/92
- 55. Medical Payment (89 III Adm Code 140)
 -First Notice Published: 16 III Reg 3409 3/6/92
 -Expiration of Second Notice Period: 6/22/92
- Aid to the Aged, Blind or Disabled (89 III Adm Code 113)
 First Notice Published: 15 III Reg 16610 11/15/91
 Expiration of Second Notice Period: 7/2/92
- 57. Reimbursement for Nusing Costs for Geriatric Facilities (89 III Adm Code 147)
 -First Notice Published: 16 III Reg 4218 3/20/92
 -Expiration of Second Notice Period: 7/16/92

Public Health

- 58. Structural Pest Control Code (77 III Adm Code 830) -First Notice Published: 16 III Reg 2092 2/2/92
 - -First Notice Fublished: 16 III Reg 2092 2/2/9 -Expiration of Second Notice Period: 7/9/92
- Skilled Nursing and Intermediate Care Facilities Code (77 III Adm Code 300)
 First Notice Published: 16 III Reg 2034 - 2/7/92
 - -Exptration of Second Notice Period: 7/9/92
 -Exptration of Second Notice Period: 7/9/92
 60. Intermediate Care for the Developmentally Disabled Facilities Code (77 III Adm Code 350)

-First Notice Published: 15 Ill Reg 18357 - 12/27/91

-Expiration of Second Notice Period: 7/9/92

- 61. Sheltered Care Facilities Code (77 III Adm Code 330)
 -First Notice Published: 15 III Reg 18459 12/27/91
 -Expiration of Second Notice Period: 7/9/92
- 62. Long-Term Care for Under Age 22 Facilities Code (77 III Adm Code 390)
 First Notice Published: 15 III Reg 18407 12/27/91
 Expiration of Second Notice Period: 7/9/92

AGENDA

Racing Board

Regulations for Meetings (11 III Adm Code 1424)
-First Notice Published: 16 III Reg 2444 - 2/14/92
-Expiration of Second Notice Period: 7/2/92 63.

Rehabilitation Services

- Americans With Disabilities Act Grievance Procedure (4 Ill Adm Code -First Notice Published: 16 Ill Reg 3433 - 3/6/92 7/15/92 -Expiration of Second Notice Period: 64.
- Tools, Equipment, Supplies and Initial Stock (89 III Adm Code 597)
 -First Notice Published: 16 III Reg 3440 3/6/92
 -Expiration of Second Notice Period: 7/15/92 65.

Savings and Residential Finance

Residential Mortgage License Act of 1987 (38 III Adm Code 450) -First Notice Published: 16 III Reg 2763 - 2/21/92 -Expiration of Second Notice Period: 6/24/92 .99

Secretary of State

- -First Notice Published: 16 Ill Reg 2449 2/14/92 -Expiration of Second Notice Period: 7/13/92 Issuance of Licenses (92 Ill Adm Code 1030) 67.
- Certificates of Title, Registration of Vehicle (92 III Adm Code 1010) -First Notice Published: 16 III Reg 5240 - 4/3/92 -Expiration of Second Notice Period: 7/3/92 68
- Revised Uniform Limited Partnership Act (14 III Adm Code 170) -First Notice Published: 16 III Reg 5247 4/3/92 -Expiration of Second Notice Period: 7/3/92 69.

State Police

Sample Collection for Genetic Marker Indexing (20 Ill Adm Code -First Notice Published: 16 III Reg 3840 - 3/13/92 -Expiration of Second Notice Period: 6/29/92 29

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AGENDA

State Police Merit Board

Ξ Procedures of the Department of State Police Merit Board (80 Adm Code 150) -First Notice Published: 16 Ill Reg 4360 - 3/20/92 -Expiration of Second Notice Period: 6/20/92

Student Assistance Commission

- Illinois National Guard Grant (23 Ill Adm Code 2730)
 -First Notice Published: 16 Ill Reg 4416 3/20/92 -Expiration of Second Notice Period: 2
- Limitation, Suspension, or Termination (23 III Adm Code 2790)
 -First Notice Published: 16 III Reg 4431 3/20/92 -Expiration of Second Notice Period: 7/3/92 33
- Merit Recognition Scholarship (MRS) Program (23 III Adm Code -First Notice Published: 16 III Reg 4452 - 3/20/92 -Expiration of Second Notice Period: 7/3/92 2761) 74.
- Student to Student (STS) Program of Matching Grants (23 Ill Adm -First Notice Published: 16 III Reg 4491 - 3/20/92 -Expiration of Second Notice Period: 7/3/92 Code 2770) 73
- Monetary Award Program (MAP) (23 Ill Adm Code 2735) -First Notice Published: 16 III Reg 4458 - 3/20/92 -Expiration of Second Notice Period: 7/3/92 76.
- Illinois Veteran Grant (IVG) Program (23 Ill Adm Code 2733)
 -First Notice Published: 16 Ill Reg 4423 3/20/92
 -Expiration of Second Notice Period: 7/3/92 77.
- Paul Douglas Teacher Scholarship Program (23 III Adm Code 2762) -First Notice Published: 16 III Reg 4475 3/20/92 -Expiration of Second Notice Period: 7/3/92 78.
- -First Notice Published: 16 Ill Reg 4483 3/20/92 State Scholarship Program (23 III Adm Code 2760) Expiration of Second Notice Period: 7/3/92 73
- Guaranteed Loan Programs (23 III Adm Code 2720) -First Notice Published: 16 III Reg 4386 3/20/92 -Expiration of Second Notice Published: 7/3/92 80

AGENDA

81. General Provisions (23 III Adm Code 2700)
First Notice Published: 16 III Reg 4368 - 3/20/92
Expiration of Second Notice Period: 7/3/92

Transportation

- 82. Shipping Container Specifications (92 III Adm Code 178)
 First Notice Published: 16 III Reg. 3876 3/13/92
 Expiration of Second Notice Period: 6/17/92
- 83. Continuing Qualifications and Maintenance of Packaging (92 III Adm Code 180)
 First Notice Published: 16 III Reg 3851 3/13/92
 Expiration of Second Notice Period: 6/17/92
- 84. Specifications for Tank Cars (92 III Adm Code 179)
 -First Notice Published: 16 III Reg 3888 3/13/92
 -Expiration of Second Notice Period: 6/17/92
- 85. Shippers General Requirements for Shipments and Packagings (92 III Adm Code 173)
 First Notice Published: 16 III Reg 3869 3/13/92
 Expiration of Second Notice Period: 6/17/92
- 86. Hazardous Materials Table and Hazardous Materials Communications (92 III Adm Code 172)
 First Notice Published: 16 III Reg 3864 3/13/92
 Expiration of Second Notice Period: 6/17/92
- 87. General Information, Regulations and Definitions (92 III Adm Code 171)
 First Notice Published: 16 III Reg 3856 3/13/92
 Expiration of Second Notice Period: 6/17/92
- 88. Carriage by Public Highway (92 III Adm Code 177)
 First Notice Published: 16 III Reg 3847 3/13/92
 Expiration of Second Notice Period: 6/17/92
- 89. Macomb Municipal Airport Hazard Zoning Regulations (92 III Adm Code 62)
 -First Notice Published: 16 III Reg 4813 3/27/92
 -Expiration of Second Notice Period: 7/6/92
- 90. Freeport Albertus Airport Hazard Zoning Regulations (92 III Adm Code 44)
 -First Notice Published: 16 III Reg 4807 3/27/92
 -Expiration of Second Notice Period: 7/6/92

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JOINT COMMITTEE ON ADMINISTRATIVE RULES

AGENDA

- III. Certification of No Objection to Proposed Rulemaking
- IV. Review of Emergency and Peremptory Rulemakings

Carnival-Amusement Safety Board

91. Carnival and Amusement Ride Inspection Law (56 III Adm Code 6000) (Emergency)
-Notice Published: 16 III Reg 7716 - 5/15/92

Central Management Services

- 92. Pay Pian (80 III Adm Code 310) (Emergency) -Notice Published: 16 III Reg 6888 4/24/92
- 93. Pay Pian (80 III Adm Code 310) (Peremptory) -Notice Published: 16 III Reg 7056 5/1/92
- 94. Pay Pian (80 III Adm Code 310) (Emergency) -Notice Published: 16 III Reg 8239 5/29/92

Employment Security

- 95. Administrative Hearings and Appeals (56 Ill Adm Code 2725) (Emergency)
 -Notice Published: 16 Ill Reg 7502 5/8/92
- 96. Claims, Adjudication, Appeals and Hearings (56 III Adm Code 2720) (Emergency)
 -Notice Published: 16 III Reg 7506 5/8/92

Department of Public Health

- 97. The Illinois Formulary for the Drug Product Selection Program (77 Ill Adm Code 790) (Emergency)
 -Notice Published: 16 Ill Reg 8571 6/5/92
- . V. Expedited Corrections

Department of Public Aid

98. Medical Payment (89 Ill Adm Code 140)

Department of Veterans Affairs

99. Persian Gulf Conflict Veterans Compensation (95 III Adm Code 121.10)

AGENDA

Exempt Rulemakings VI.

Pollution Control Board

Permits (35 Ill Adm Code 309) 8

-Proposed Date: 12/6/91 -Adopted Date: 4/27/92

Pretreatment Programs (35 Ill Adm Code 310)
-Proposed Date: 12/6/91
-Adopted Date: 4/27/92 101

Sewer Discharge Criteria (35 Ill Adm Code 307) 12/6/91 -Adopted Date: 4/27/92 -Proposed Date:

102.

Underground Storage Tanks (35 Ili Adm Code 731) -Proposed Date: 2/14/92 -Adopted Date: 4/24/92

103

VII. Agency Responses to Joint Committee Action

Public Health

Control of Sexually Transmissible Diseases Code (77 Ill Adm Code -First Published: 11/22/91 -Objection Date: 3/3/92 104.

Housing Development Authority

-Response: Agree to initiate rulemaking

Low-Income Housing Tax Credit Allocation (47 III Adm Code 350)
-First Published: 4/3/92
-Objection Date: 5/12/92 105.

-Response: Agree to initiate rulemaking

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JOINT COMMITTEE ON ADMINISTRATIVE RULES ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED

The following second notices were received by the Joint Committee on Administrative Rules during the period of May 27, 1992 through June 2, 1992, and have been scheduled for review by the Committee at its June 16, 1992 meeting at 10:00 a.m. Other items not contained in this published list may also be considered. Members of the public wishing to express their views with respect to a rule should submit written comments to the Committee at the following address: Joint Committee on Administrative Rules, 509 South Sixth Street, Sulte 500, Springfield, IL 62701.

	JCAR <u>Meeting</u>	6/16/92	6/16/92	6/16/92	6/16/92	6/16/92	6/16/92
	Start of First <u>Notice</u>	4/10/92 16 III Reg 5395	4/10/92 16 III Reg 5391	3/6/92 16 Ill Reg 3238	4/10/92 16 III Reg 5436	4/10/92 16 Ill Reg 5443	4/10/92 16 III Reg 5454
The state of the s	Agency and Rule	Commissioner of Banks and Trust Companies, Administration of Assets Obtained in Collection of a Debt (38 III Adm Code 354)	Commissioner of Banks and Trust Companies, Acquisition of Former Main Banking Premises or Branches of Eligible Depository Institutions (38 III Adm Code 307)	Illinois Commerce Commission, Conversion of Contract to Common Authority (92 III Adm Code 1309)	Department of Conservation, General Hunting and Trapping on Department- Owned or -Managed Sites (17 III Adm Code 510)	Department of Conservation, Muskrat, Mink, Raccoon, Opossum, Striped Skunk, Weasel, Red Fox, Gray Fox, Coyote, Beaver and Woodchuck (Groundhog) Trapping (17 III Adm Code 570)	Department of Conservation, Raccoon, Opossum, Striped Skunk, Red Fox, Gray Fox, Coyote and Woodchuck (Groundhog) Hunting (17 III Adm Code 550)
10001	Second Notice Expires	7/9/92	7/9/92	7/13/92	7/13/92	7/13/92	7/13/92

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JOINT COMMITTEE ON ADMINISTRATIVE RULES ILLINOIS GENERAL ASSEMBLY

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JOINT COMMITTEE ON ADMINISTRATIVE RULES ILLINOIS GENERAL ASSEMBLY

SECOND NOTICES RECEIVED (page 2)

	JCAR Meeting	6/16/92	6/16/92		6/16/92	6/16/92						
VED	Start of First Notice	3/6/92 16 III Reg 3440	4/3/92 16 III Reg	5133	4/10/92 16 III Reg 5482	3/20/92 16 Ill Reg	4218					
SECOND NOTICES RECEIVED (page 3)	Agency and Rule	Department of Rehabilitation Services, Tools, Equipment, Supplies and Initial Stock	(89 III Adm Code 597) Illinois Commerce Commission, Americans With Disabilities Act	Grievance Procedure (4 Ill Adm Code 400)	Department of Conservation, White- Tailed Deer Hunting by Use of Bow and Arrow (17 III Adm Code 670)	Department of Public Aid, Reimbursement for Nursing Costs for Geristric	racinties (89 III Adm Code 147)					
	Second Notice Expires	7/15/92	7/16/92		7/16/92	7/16/92					•	
	JCAR <u>Meeting</u>	6/16/92	6/16/92	6/16/92	6/16/92		6/16/92	6/16/92	6/16/92	6/16/92	6/16/92	6/16/92
VED	Start of First Notice	4/10/92 16 III Reg 5466	4/10/92 16 III Reg 5475	4/10/92 16 Ill Reg	5501 4/10/92 16 III Reg	5525	4/10/92 16 III Reg 5540	4/10/92 16 III Reg 5433	4/10/92 16 III Reg 5429	4/10/92 16 Ill Reg 5741	4/3/92 16 III Reg 5185	3/6/92 16 Ill Reg 3433
SECOND NOTICES RECEIVED (page 2)	Agency and Rule	Department of Conservation, The Taking of Wild Turkeys - Fall Archery Season (17 Ill Adm Code 720)	Department of Conservation, The Taking of Wild Turkeys - Fall Gun Season (17 III Adm Code 715)	Department of Conservation, White- Tailed Deer Hunting by Use of	Firearms (17 III Adm Code 650) Department of Conservation, White- Tailed Deer Hunting Season by Use of	Muzzeloading Riffes (17 III Adm Code 660)	Department of Conservation, Woodcock, Snipe, Rail and Teal Hunting (17 III Adm Code 740)	Department of Conservation, Dog Training on Non-Department Owned or -Managed Lands (17 III Adm Code 960)	Department of Conservation, Dog Training on Department-Owned or -Managed Sites (17 III Adm Code 950)	Department of Professional Regulation, The Illinois Landscape Architecture Act of 1989 (68 Ill Adm Code 1275)	Illnois Housing Development Authority, Low-Income Housing Tax Credit Allowance (47 Ill Adm Code 350)	Department of Rehabilitation Services, Americans With Disabilities Act Grievance Procedure (4 III Adm Code 300)
	Second Notice Expires	7/13/92	7/13/92	7/13/92	7/13/92		7/13/92	7/13/92	7/13/92	7/13/92	7/13/92	7/15/92

PROCLAMATION

FRANK ANNUNZIO DAY (Revised)

Whereas, from the school halls, to the union halls, to the halls of Congress, Frank Annunzio has fought for the pride and dignity of all men and women regardless of race or ethnic heritage; and

Whereas, in 1949, Annunzio was appointed to head the Illinois and in that position used his talents to ensure safe working conditions and proper compensation for Department of Labor workers; and

Whereas, three years later, he left public service to start his own business, but the desire to improve the American way of life compelled him to seek his first term as United States

Representative to Congress; and Whereas, as a congressman, Annunzio worked to prevent the spread of Communism in Europe and fought for strict federal legislation to ensure truth in advertising; and

causes of Italian-Americans, consumers, veterans, immigrants, and Whereas, Congressman Annunzio has diligently represented his constituents; and

including the Bishop Sheil Medal, the Pope John XXIII Award for Meritorious Service, and the Merit Award of the Illinois Division Whereas, Annunzio has received many awards and honors,

of the Polish-American Congress; and Whereas, on June 13, he will be honored once again when he receives the Man of the Year Award from the Joint Civic Committee of Italian Americans;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim June 13, 1992, as FRANK ANNUNZIO DAY in Illinois in recognition of his outstanding accomplishments as a leader, legislator, and humanitarian. Issued by the Governor May 21, 1992.

Filed with the Secretary of State May 28, 1992.

GARDEN WEEK

members of The Garden Clubs of Illinois, Inc. are concerned with promoting conservation and beautification Whereas,

they encourage citizens to plant trees, shrubs, and highways, and on public Whereas, they encourage citizens vines near their homes, along the grounds; and

a greater respect and care for gardening instills Whereas,

which add beauty, fragrance, and nutrition to our lives; and our environment and our natural resources; and whereas, our gardens also yield herbs, foliage, and

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Whereas, gardening furnishes a challenging and productive full- or part-time activity for a large number of our citizens; Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim June 7-13, 1992, as GARDEN WEEK in Illinois. furnishes

Issued by the Governor May 19, 1992. Filed with the Secretary of State May 28, 1992.

MENTAL HEALTH COUNSELORS WEEK

of counseling that emphasizes the developmental and adjustive nature of mental health services; and Whereas, mental health counselors work in a specialized field

Whereas, mental health counselors provide professional counseling services, including the application of principles of psychotherapy, human development, learning theory, group dynamics and the etiology of mental illness and dysfunctional behavior to

individuals, couples, families, and groups for the purposes of treating psychopathology and promoting optimal mental health; and Whereas, mental health counselors work in psychiatric hospitals, community mental health agencies, private clinics, community hospitals, rehabilitation centers, private practice settings, and on college campuses, providing direct delivery of mental health services to citizens;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim June 7-13, 1992, as MENTAL HEALTH COUNSELORS WEEK in Illinois.

Issued by the Governor May 19, 1992. Filed with the Secretary of State May 28, 1992.

WEEK OF THE HIGH RISK CHILD 92-278

organized December 15, 1975, at Pritzker Children's Psychiatric Unit of Michael Reese Hospital for the purpose of coordinating the delivery of mental health services to high risk children on the Children and Adolescents Forum, Inc.

the southside of Chicago; and
Whereas, a high risk child is one who exhibits covert or
overt symptoms of behavioral, emotional, psychological, physical,
familial, or environmental dysfunctioning; and
Whereas, since its inception, the forum has made many
outstanding contributions to the community at large including
publishing three Children and Adolescents Mental Health Services developing policy recommendations on Improving ildren, a paper sent to the governor, state legislators, and other human services professionals; publishing the newsletter The Urban Child; and presenting numerous community education workshops for parents and professionals; and Services for Children, a directories;

Whereas, the forum also provides an information referral and

initiatives is the planning and implementation of its Annual Teen Leadership Conference;

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim June 1-5, 1992, as the WEEK OF THE HIGH RISK CHILD in Illinois and commend the Children and Adolescents Forum, Inc. for its many contributions to emotionally disturbed and behaviorally disordered children.

Issued by the Governor May 21, 1992. Filed with the Secretary of State May 28, 1992.

HOLY TINITY ORTHODOX CATHEDRAL CENTENNIAL CELEBRATION DAYS

the prestigious federal publication, The National Registry of and illustrious mention past, the Holy Trinity Orthodox Cathedral has earned splendor architectural Historic Places; and

of Holy Trinity Cathedral and served the parish from 1895 to 1907. He was later martyred in the Bolshevik Revolution in Russia and subsequently canonized as a saint of the Orthodox Church; and Whereas, Patriarch Tikhon consecrated Holy Trinity Cathedral in 1903, became yet another martyr in the stand against Bolshevism, and was also canonized; and the construction Whereas, Father John Kochurov administered

Whereas, the Holy Trinity Cathedral parish represents a microcosm of its parent church, first the Russian Orthodox Church in America, then the Orthodox Church in America, and Whereas, in its capacity as the bishop's see, the cathedral has provided the guidance and leadership that led the state's Orthodox parishes through both good and bad times; and Whereas, Holy Trinity Orthodox Cathedral is celebrating its centennial June 12-14, 1992; and

Whereas, the 100th anniversary celebration will include an academic symposium; Great Vespers, a concert of liturgical and folk music; the Hierarchical Divine Liturgy celebrated by His Beatitude Theodosius, Metropolitan of All America and Canada; and

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim June 12-14, 1992, as HOLY TRINITY ORTHODOX CATHEDRAL CENTENNIAL CELEBRATION DAYS in Illinois.

Issued by the Governor May 27, 1992. a gala banquet and ball;

Filed with the Secretary of State May 28, 1992

RESOURCE CONSERVATION AND DEVELOPMENT RECOGNITION AND APPRECIATION WEEK

the Resource Conservation and oĘ purpose the Whereas,

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development, and utilization of natural resources; to improve the to enhance to accelerate the general level of economic activity; and environment and standard of living; and Development (RC&D) program is

Whereas, the U.S. Secretary of Agriculture, through authorities delegated to SCS and other USDA agencies provides states, local units of government, and local nonprofit organizations with technical and financial assistance necessary to operate and maintain an RC&D area; and

Whereas, there are eight organized RC&D areas covering

Illinois counties; and

Whereas, through the USDA, the RC&D program helps citizens develop and carry out action-oriented plans for the social, economic, and environmental betterment of their communities; and Whereas, RC&D Councils endeavor to assure that their composition reflects that of the population of an RC&D area, and that the program and its services are available regardless of race, color, national origin, age, sex,

regardless of race, color, national origin, age, sex, religion, marital status, or handicap;
Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim May 4-10, 1992, as RESOUNCE CONSERVATION AND DEVELOPMENT RECOGNITION AND APPRECIATION WEEK in Illinois.

Filed with the Secretary of State May 28, 1992 Issued by the Governor May 27, 1992.

SECOND PRESBYTERIAN CHURCH OF CHICAGO DAY

Second Presbyterian Church of Chicago was founded June 1, 1842; and Whereas,

Whereas, Journal as a landmark by the city of Chicago, the State of Illinois, and the U.S. Department of Interior; and Whereas, 1992 marks the 150th anniversary of Second Presbyterian Church. To commemorate the event, the church has planned a year-long celebration from May 31, 1992 to May 31,

Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim May 31, 1992, as SECOND PRESBYTERIAN CHURCH OF CHICAGO DAY in Illinois and congratulate the church on its 150th year of service.

Filed with the Secretary of State May 28, 1992. Issued by the Governor May 27, 1992.

VILLAGE OF WILLOW SPRINGS DAYS

officially Whereas, people began settling in the Willow Springs area Willow Springs was οĘ the Village 1840s; and Whereas, the

92 established in 1892; and

Whereas, through the years, Willow Springs has made contributions to the economic development of our state. The village is an important piece of the patchwork of Illinois' communities; and Whereas, May 28, 1992, marks the 100th anniversary of the Village of Willow Springs; and Whereas, from May 28-31, 1992, the village will celebrate its centennial with a parade and other festivities; Therefore, I, Jim Edgar, Governor of the State of Illinois, proclaim May 28-31, 1992, as VILLAGE OF WILLOW SPRINGS DAYS in Illinois and extend best wishes to the village on its 100th

anniversary. Issued by the Governor May 27, 1992. Filed with the Secretary of State May 28, 1992.

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The Sections Affected Index lists, by Title, each Section of a Part on which rulemaking activity has occurred in this volume (calendar

RQ = Request for Correction S = Suspend rule W = Withdrawal of year) of the Register. The columns indicate the type of rulemaking activity and the action taken along with the page number on which the first page of the notice of rulemaking activity appeared. If a Section on which action is being taken in the current volume of the Register was proposed in a previous volume, the last two digits of the previous volume's year appear immediately after the page number separated by a slash (e.g. 11 111. Adm. Code 436.05 was proposed last year and adopted this year. The action entry reads: (P-15655/91; A-4520). The codes are listed below. CC = Codification Changes PF = Prohibited filing E = Emergency rule PP = Peremptory rule F = Failure to Remedy R = Refusal to Modify or Withdraw P = Propsed rule ACTION CODES = JCAR Objection Objection

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	Volume 16,	TITLE 4 (CONT'D)	875.80	ATTTI	1.10	1.15	1.20	1.22	1.25	1.40	1.42	1.44	1.45	1.55	1.60	1.65	1.75	1.77	1.80	1.85	1.95	1.112	1.114	1.110	1.118	1.122	1.124	1.126	1.128	1.225	1.240	1.265	1.2/0	1.280	1.285	1.295	1.300	1.305	1.310	1.315	1.320	1.325	1.330	1.335	1.340	1.345	1.350	1.400
	June 12, 1992	(P-5097)	(P-5097)	(F-5097) (P-7083)	(F-7083)	(P-7083)	(P-7083)	(P-7083)	(P-7083)	(P-5569)	(P-5369)	(F-5369)	(F-5369)	(P-5569)	(P-5569)	(P-3253; A-8503)	(P-1779; A-8523)	(F-1779; A-6523)	(F-1779; A-8323)	(P-1779; A-8523)	(P-1779; A-8523)	(P-1779; A-8523)	(P-8338)	(P-8338)	(P-8338)	(P-8338)	(F-8338)	(F-8338)	(P-8026)	(P-8026)	(P-8026)	(P-8026)	(P-8026)	(P-8026)	(P-8026)	(P-8160)	(P-8160)	(P-8160)	(P-8160)	(F-8160)	(F-8160)	(r-816v)						
	EX	c	u :	= =	: =	c	•	c	-	c	= :	= 1	= =	: =	u	_	E	a	-	u	=	c	= 1	=	= =	: =	=	u	u	E	u	ជៈ	= :	= =	u	u	E	п	-	E	u	u	u	u	=	= 1	= 1	=
ILLINOIS REGISTER	FECTED IND	550.50	550.60	575 10	575.20	575.30	575.40	575.50	575.60	600.10	000.20	600.30	600.50	900.009	600.70	650.10	650.20	650.30	650.40	650.50	650.60	650.70	675.10	675 30	675.40	675.50	675.60	675.70	750.10	750.20	750.30	750.40	750.50	750.70	850.10	850.20	850.30	850.40	850.50	850.60	850.70	875.10	875.20	875.30	875.40	07.570	07.570	21.5
ILLINOIS	16, Issue #24 SECTIONS AFFECTED INDEX		a :	n (F-2113; A-8303) n (P-7113; A-8565)	: =	п	a	п	a	п		= 1	= =	: =	n (P-4125)	n (P-4125)	a	5	a	n (P-5133)	n (P-5133)	n (P-5133)	n (F-5133)	n (F-5133)	n (P-2292: A-8944)	: =	5	n (P-2292; A-8944)	n (P-2292; A-8944)	n (P-2292; A-8944)	n (P-2292; A-8944)	n (P-3/0/)	n (F-3/0/)	п (Р-3707)	n (P-3707)	n (P-3707)	n (P-3707)	n (P-2721)	n (P-2721)	n (P-2721)	n (P-5097)	n (F-3097)	n (F-3097)	(1000-1) II				
	Volume 1	TITLE 4 (CONT'D)	325.150	325.100	350.110	350.120	350.130	350.140	350.150	350.160	350.170	320.180	375.20	375.30	375.40	375.50	375.60	375.70	400.10	400.20	400.30	400.40	400.50	400.00	450.10	450.20	450.30	450.40	450.50	450.60	450.70	475.10	475.13	475.20	475.30	475.40	475.50	500.1	500.2	500.3	500.4	500.5	500.6	500.7	550.10	550.20	550.30	2000

- 1	June 12, 1992		-	_	am (P-8289)	am (P-18045/91; A-4835)		am (P-18045/91; A-4835)	am (P-8275)	am (P-8275)	am (E-7925) (C-8614)	_	am (E-7925) (C-8614)		am (E-1725) (C-8014) (P-8275)		am (E-7925) (C-8614)	(P-8275)	am (P-18055/91: A-4839)		•	am (P-18055/91; A-4839)	_	am (P-15647/91; A-1826)		am (P-/161) am (P-7161)	_	am (P-7161)	am (P-7161)	n (P-7161)	am (F-/101)	-	_	Ŭ	am (P-5443)	am (P-14157/91; A-570)		am (P-14157/91; A-570)	_	_		_			am (F-1413//91; A-5/0)	-
ILLINOIS REGISTER	SECTIONS AFFECTED INDEX	TITLE 17 (CONT'D)			110.170						130.50		130.70	130 120			130.130	130 136				150.40				530.20				530.115						590.10		590.20							590.90	
	Volume 16, Issue #24 SECTIONS A	CONT'D	а	a	1/05.30 n (P-1//9)	a a	a	1705.70 n (P-1779)) am 0	ua a m	E I	170.12 am (F-5247)		a a	em e	170.30 n (P-5247)		am	a	520.1110 n (P-89)	4		a	526.20 n (P-6524)	: 4	a	a	a	526.70 n (F-6324)	9 6	a B	am	am	ma .	550.50 am	550.60 am (P-7090)			110.4 n (E-7934; C-8615)		am	E E	110.90 am (P-8289)	
- 1	, 1992		4520)	45.20)																	•																			á	(68)	7489)			=	(00
	June 12,		(P-15655/91; A-4520)	(P-15655/91; A-4520)	(F-6/33)	(F-6755)	(P-6755)	(P-6755)	(P-2292)	(P-6751)	(P-6955)	(P-6955)	(P-6955)	(P-6955)	(F-6955) (P-6955)	(P-6955)	(P-6955)	(P-6955)	(F-6955)	(P-6955)	(P-6955)	(P-6955)	(P-6955)	(P-6955)	(P-6955)	(P-6955) (P-6955)	(P-6955)	(P-6955)	(P-6955)	(P-6955)	(F-0955)	(F-6955) (P-6955)	(P-6955)	(P-6955)	(P-6955)	(P-2439)	(P-2439)		(P-2439)	(P-2433; A-8229)	(F-15388/91;A-7489)	(P-15388/91;A-7489)	(P-2444)	(P-2444)	(F-2444) (P-1266: A-7493)	+/-V'0097-1)
		ONT'D)	am		440.40 an (P-6/55)	a	am	q	a	me.	аш	am	Ш	_ `	II W	am	am	509.80 am (P-6955)		am	me	509.130 r (P-6955)	am	E	am	509.175 r (P-6955) 509.190 am (P-6955)		ш	шв	_	Ē.			-	am	L	1305.130 r (P-2439)		o am	L 1	a :	a	L.	_	1424.170 am (F-2444) 1424.250 am (P-1266: A-7493	1
ILLINOIS REGISTER	Volume 16, Issue #24 SECTIONS AFFECTED INDEX June 12	ONT'D)	436.130 am	(P-1921; A-8349) 436.140 r		n (P-1921; A-8349) 440.60 am	am (PP-1899) 440.120 am	q	п (Р-7955) 450.10 п	n (P-7955) 502.30 am	n (P-7955) 509.10 am	n (P-7955) 509.20 am	(P-7955) 509.30 am	n (F-/95) 509-40 am (P-7055) 509-40 am	n (P-7955) 509.60 am	n (P-2969; A-8361) 509.70 am	n (P-2969; A-8361) 509.75 am	am T	n (P-7949) 509.95 n	n (P-7949) 509.100 am	n (P-7949) 509.110 am		am (P-8297) am /	am (P-8297) 509.160 am	am			п (Р-1263; А-7486) 509.200 ат	am (P-6742) 509,210 am	(P-6742) 509.220 am	min (r-0/4z) 209:230 min (p-6/4z)	am (P-6742) 509.250 r	am (P-6747) 509.260 r	n (P-15655/91; A-4520) 509.265 r	r (P-15655/91; A-4520) 509.270 am	am (P-15655/91; A-4520) 1305.120 r	r (P-15655/91; A-4520) 1305.130 r	r (P-15655/91; A-4520)	r (P-15655/91; A-4520) 1305.140 am	(P-15655/91; A-4520) 1314.10 r	(F-13033/91; A-4320) 1318,180 n	r (P-15655/91; A-4520) 1318.190 n	r (P-15655/91; A-4520) 1424.100 r	r (P-13633/91; A-4320) 1424.103 r		ain 0.22,7241 (0.20,0.71,0.70,0.71)

TITLE 17 (CONT'D) 650.20 am 650.21 am											
a a			TITLE 17 (CONT'D)	(T.D)		TITLE 17 (CONT'D)	ē		TITLE 20 (CONT'D)	Ę	
am	(P-5501)		850.10	am	(P-4616)	2520.50	am	(P-2297; A-8479)	504.920	E E	(P-3715)
	(P-5501)		850.20	am	(P-4616)		am	(P-14794/91; A-1806)	504.930	me m	(P-3715)
am	(P-5501)		850.30	аш	(P-4616)	3010.50	am	(P-14794/91; A-1806)	525.110	am	(E-3583) (P-5166)
am	(P-5501)		880.10	=	(P-13603/91; A-109)		am	(P-14794/91; A-1806)	525.130	E	(P-5166)
am	(P-5501)		880.20	q	(P-13603/91; A-109)			(P-14794/91; A-1806)	525.140	=	(E-3583) (P-5166)
аш	(P-5501)		880.30	a	(P-13603/91; A-109)	3020.20	am	(P-14820/91; A-1833)	525.150	E	(P-5166)
am	(P-5501)		880.40	п	(P-13603/91; A-109)	3020.40 в	_	(P-14820/91; A-1833)	105.10	-	(P-4803)
am	(P-5525)		880.50	п	(P-13603/91; A-109)	3020.50	am	(P-14820/91; A-1833)	1205.20	a	(P-4803)
am	(P-5525)		890.10	G	(P-17811/91; A-5262)	3020.70 a	am	(P-14820/91; A-1833)	1205.30	9	(P-4803)
am	(P-5525)		890.20	п	(P-17811/91; A-5262)	3020.80	am	(P-14820/91; A-1833)	1205.40	=	(P-4803)
am	(P-5525)		890.30	a	(P-17811/91; A-5262)			(P-14807/91; A-1816)	1205.50	. =	(P-4803)
am	(P-5525)		890.40	a	(P-17811/91; A-5262)			(P-14807/91: A-1816)	1235.10		(F-17785/91: O-1746)
am	(P-5525)		890.50	п	(P-17811/91; A-5262)			(P-14807/91: A-1816)		:	(P-17566/91: A-7041)
am	(P-5525)		950.20	am	(P-5429)			(P-14783/91: A-1797)	1235.20	-	(E-17785/91: O-1746)
am	(P-5525)		950.40	am	(P-5429)			(P-14783/91: A-1797)		1	(P-17566/91: A-7041)
am	(P-5525)		960.30	am	(P-5433)			(P-14783/91: A-1797)	1235.30	=	(F-17785/91: O-1746)
am	(P-5482)		970.10	-	(P-2727: R-8497)	6		(P-5576)		1	(P-17566/91: A-7041)
am	(P-5482)		970.20	-	(P-2727; R-8497)			(r. 2576)			(1-1)-00(51; U-1041)
E	(P-5482)		970.30	1-	(P-2727: R-8497)			(P-5576)	1235 40		(E-17785/01: 0-1746)
E	(P-5482)		070 40		(P-2727: P-8407)			(9/55-1)	04.0071	=	(E-1/183/91; O-1/40)
E 8	(P-5482)		970.50	a 1-	(P-2727: R-8497)			(F-33/0) (B-5676)	1725 50	,	(F-1/300/91; A-7041)
			05.07.0		(P.2727: P-8407)			(1-33/0) (1-33/6)	00.0071	=	(E-1//83/91; O-1/46)
E .			1110 30		(P-13594/91· A-103)			(5/5/7) (8-5576)	1725 60		(F-1/306/91; A-7041)
E E	(P-5157)		1530.30	Te C	(P-2972: A-8489)			(F-5576)	00.0071	=	(B-17566/01: A-7041)
a E	(P-14833/	(F-14833/91: A-1843)	1530.50	E 6	(P-2972; A-8489)	4170 500		(I-5576)	1735 70	:	(F-1736/91, A-7041)
a me	(P-14833/	(P-14833/91; A-1843)	1530.60	E E	(P-2972: A-8489)	4170.550		(F-33/0)	1733.70	=	(B-17566/01: A-7041)
-	(P-14833/	(P-14833/91: A-1843)	1530 Fx A	-	(P-2972- A-8489)	4170.600		(5/55-T)	1735 80	•	(F-1/300/91; A-1041)
: E	(P-14833/	(F-14833/91; A-1843)	1530.Ex.B	: c	(P-2972; A-8489)	4170.700		(F-33/0)	1233.00	=	(D-17565/01; O-1740)
E	(P-14833/	(P-14833/91: A-1843)	1535.1		(P-2979: A-8499)	4170 800		(J. 25.10)	1735 00	:	(F-1/300/91, A-/041)
E E	(P-5475)	(21.21.11.1	1535.5	a me	(P-2979: A-8499)	000:011		(0,55-1)	06:0071	=	(B-17566/91; O-1740)
E	(P-5475)	,	1535.50	E	(P-2979: A-8499)	Triff E 20			1235 100		(F-1/300/91; A-7041)
E .	(P-5475)		1538 5		(P-75: W-455) (P-148)			(D-17010/01: A 4070)	001:071	=	(E-1//83/91, O-1/40)
аш	_		1538.10		(P-755; W-4555) (P-4148)			(P-17010/91: A-6979)	1235.110	-	(F-17785/91: O-1746)
am	(P-5466)		1538.20	п	(P-755; W-4555) (P-4148)			(P-5176)		ı	(P-17566/91: A-7041)
am	(P-5466) (P-8681)	P-8681)	1538.30	п	(P-755; W-4555) (P-4148)		_	(P-5176)	1235.120	=	(E-17785/91: 0-1746)
аш	Ī		1538.40	п	(P-755; W-4555) (P-4148)		_	(P-5176)		ı	(P-17566/91; A-7041)
аш	(P-5143)		1538.50	a	(P-755; W-4555) (P-4148)		_	(P-1941; A-8166)	1235.130	a	(E-17785/91: 0-1746)
аш	(P-5143)		1538.60	a	(P-755; W-4555) (P-4148)		_	(P-1941; A-8166)			(P-17566/91; A-7041)
аш	(P-5540)		1538.70	п	(P-755; W-4555) (P-4148)	435.15 B	ua u	(P-1941; A-8166)	1285.10	a	(P-3840)
аш	(P-5540)		1538.80	п	(P-755; W-4555) (P-4148)	435.20 a	аш ((P-1941; A-8166)	1285.20	9	(P-3840)
аш	_	(P-17817/91; A-5267)	1590.50	am	(P4132)	435.30 a	am ((P-1941; A-8166)	1285.30	u	(P-3840)
am	(P-17817/	(P-17817/91; A-5267)	1590.60	am	(P-4132)		am ((P-1941; A-8166)	1285.40	a	(P-3840)
аш	(P-17817/	(P-17817/91; A-5267)	1590.70	ат	(P4132)	435.50 au) ma	(P-1941; A-8166)	1285.50	=	(P-3840)
	(P-6571) (E-6016)	(E-6016)	1590.80	am	(P4132)) шв	(P-1941; A-8166)	1285.60	п	(P-3840)
аш	(P-17817/	(P-17817/91; A-5267)	1590.90	am	(P4132)	435.70 n	_ _	(P-1941; A-8166)	1285.70	u	(P-3840)
aш	_	(P-17817/91; A-5267)	1590.100	am	(P4132)	504.802 a) ma	(P-3715)	1285.80	a	(P-3840)
am	Ĭ	(P-17817/91; A-5267)	1590.110	am	(P4132)	504.810 a) Ha	(P-3715)	1570.10	п	(P-2732)
аш	Ĭ	(P-18327/91; A-5257)	1590.120	am	(P4132)	504.830 a	am ((P-3715)	1570.20	п	(P-2732)
ап	Ī	P-18327/91; A-5257)	2030.15	am	(P-2302; A-8483)	504 005		, in the second	00 0000		1
									1570.30	5	

D) (P-2732) (P-1948) (P-10) (P-10) (P-10) (P-409) (P-732) (P-469) (P-732)	2) 3) 8)				NOO! EE 31 THE		ייייייייייייייייייייייייייייייייייייייי	2760.5	am.	
(P-273) (P-273) (P-194) (P-194) (P-194) (P-194) (P-196) (P-196	(2) (2) (8)	TITLE 23			THE PARTY OF THE P	1		5.00.7		(D-4/192)
P-273 P-194 P-194 P-195 P-196 P-199	. (2)	1.230	am	(P-8684)	1015,50	4	(P-14852/91: A-4496)		E	(P-4483)
P-194 P-194 P-195 P-195 P-195 P-195 P-195 P-469 P-469 P-469 P-469 P-469 P-469 P-469 P-469 P-469 P-469 P-469 P-469	66	1.240	am	(P-8684)	1015.60		(P-14852/91; A-4496)			(F-4483)
P-194 P-194 P-194 P-194 P-195	-	1.420	am	(P-8684)	1015.70	d	(P-14852/91: A-4496)		E	(P-4483)
P-194 P-194 P-194 P-199 P-19 P-1	(6)	1.440	am	(P-8684)	2700.10	i a	(P-4368)		E	(P-4452)
P-194 P-194 P-195 P-199 P-19 P-1	(8)	1.720	am	(P-8684)	2700.20	am	(P-4368)	2761.20	am	(P-4452)
P-194 P-152 P-10 P-10 P-469 P-	(8)	1.730	am	(P-8684)	2700.30	am	(P-4368)	2761.30	am	(P-4452)
(P-152) (P-152) (P-152) (P-10)	(8)	1.735	аш	(P-8684)	2700.40	ma	(P-4368)	2762.10	am	(P-4475)
G G G G G G G G G G G G G G G G G G G	(P-15251/91; A-4002)	1.736	п	(P-8684)	2700.50	am	(P-4368)	2762.20		(P-4475)
P-10) P-10) P-10) P-10) P-10) P-10) P-10)	(E-727) (P-7756)	120.10	am	(P-1452)	2700.55	am	(P-4368)	2762.30		(P-4475)
P-10 P-10 P-10 P-10 P-10 P-10 P-10 P-10	,	120.30	аш	(P-1452)	2700.60	me	(P-4368)	2762.40		(P-4475)
P.10)		120.40	am	(P-1452)	2700.70		(P-4368)	2763.10	-	(P-18129/91: A-7048)
P.10), (P.10),		120.50	me	(P-1452)	2720 5	ma	(P-4386)	07.63.70		(P-18129/01: A-7048)
7 4 6 9 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		120.60	am	(P-1452)	2720.6		(P-4386)	02:5012		(B-18123/31, A-7048)
7 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6) (E-732)	120.90	E	(P-1452)	2720 10		(A-15026/01: A-4060)	,	= ((B 18120/01: A 7048)
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		130.10	E .	(P-1439)	71.02.12		(F-13026/71; A-406	,	= 1	(F-18129/91; A-7046)
) (E-722)	130.70		(1-1+32) (2-1439)	00 0000		(r-4380)	2763.30	a :	(F-18129/91; A-7048)
) (E-732)	130.20	H I	(F-1439)	27.02.70	E	(F-4386)	2770.10	t:	(P-4491)
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7) (E-732) (F-733)	130.30	шв	(F-1439)	2720.25		(P-4386)	2770.10	a	(P-4491)
7 7 7 7 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6) (E-732) (# 733)	130.40	E E	(F-1439)	2720.30		(P-4386)	•	а	(P-4491)
7 4 4 9 4 4 6 9 4 6 9 4 6 9 4 6 9 4 6 9 4 6 9 4 6 9 4 6 9 4 6 9 4 6 9 6 9) (E-/32) (F-732)	130.45	a	(P-1439)	2720.40	an a	(P-1502691; A-4060)		at:	(P-4491)
(P-469)) (E-732)	130.50	аш	(P-1439)			(P-4386)	2770.30	am	(P-4491)
(F-469	(P-469) (E-732)	202.10	am	(P-7231)	2720.50		(P-4386)	2771.10	a	(P-18114/91; A-6873)
) (E-732)	202.20	am	(P-7231)	2720.55	am	(P-4386)	2771.20	п	(P-18114/91; A-6873)
2		202.30	am	(P-7231)	2720.60	am	(P-4386)	2771.30	а	(P-18114/91; A-6873)
P-469	(P-469) (E-732)	202.40	аш	(P-7231)	2720.70	am a	(P-4386)	2771.Ap.A	u Y	(P-18114/91; A-6873)
(P-469)) (E-732)	202.44	a	(P-7231)	2720.80	ma	(P-4386)	2790.10	аш	(P-4431)
(F-469	(P-469) (E-732)	202.46	a	(P-7231)	2720.90	П	(P-4386)	2790.20	am	(P-4431)
(P-469)) (E-732)	202.50	am	(P-7231)	2720.105	am	(P-4386)	2790.30	am	(P-4431)
(P-469		202.60	am	(P-7231)	2720.120		(P-4386)	2790.40	аш	(P-4431)
(P-469)		226.605	аш	(P-3724)	2720.130	am ((P-4386)	2790.50	am	(P-4431)
(P-469)) (E-732)	226.640	am	(P-3724)	2720.200	ma ((P-4386)	2790.60	am	(P-4431)
(P-469)) (E-732)	235.10	п	(P-439)	2720.210	am ((P-4386)	2790.70	am	(P-4431)
(P-469)) (E-732)	235.20	п	(P-439)	2720.Ap.A	A. am	(P-4386)	2790.80	am	(P-4431)
(P-469)		235.30	п	(P-439)	2730.5	am	(P-4416)	2790.90	am	(P-4431)
(P-469)) (E-732)	235.40	п	(P-439)	2730.10	am	(P-4416)	2790.100	am ((P-4431)
(P-469	(P-469) (E-732)	235.45	п	(P-439)	2730.20	am	(P-4416)	2790.110	am c	(P-4431)
(P-469)) (E-732)	235.50	п	(P-439)	2733.10	am	(P-4423)	, 2790.120	am ((P-4431)
(P469)) (E-732)	235.60	п	(P-439)	2733.20	ATT.	(P-4423)(P-18121/91;	1; 2790.130	am ((P-4431)
(P-469)) (E-732)	235.100	¤	(P-439)			A-6880)		am ((P-4431)
(P-469	(P-469) (E-732)	235.110	а	(P-439)	2733.30	me m	(P-4423) (P-18121/91;		.A r	(P-4431)
(P-469)) (E-732)	235.120	-	(P-439)			A-6880)	3040.160	am ((P-7321)
(P-469)) (E-732)	235.130	п	(P-439)	2735.10	am	(P-4458)			
(P-469)) (E-732)	235.135	c	(P-439)	2735.20	am	(P-4458)	TITLE 26		
(P-469	(P-469) (E-732)	235.140	c	(P-439)	2735.30	am	(P-4458)	100.30	4	(P-5939/91; A-6982)
(P-469	(P-469) (E-732)	235.150	q	(P-439)	2735.40	am	(P-4458)	125.425	am am	(P-5943/91; A-6986)
(P-469	(P-469) (E-732)	260.40	am	(P-5550)	2735.50	am	(P-4458)			
(P-469	(P-469) (E-732)	1015.10	c	(P-14852/91; A-4496)	2735.60	am	(P-4458)	TITLE 29		
(P-469	(P-469) (E-732)	1015.20	п	(P-14852/91; A-4496)	2735.70	am	(P-4458)	205.10	am	(P-5556)
(P-469	(P-469) (E-732)	1015.30	E E	(P-14852/91; A-4496)	2735.80	am	(P-4458)	205.20	аш	(P-5556)
		1015.40	u	(P-14852/91; A-4496)	2735.100	am ((P-4458)	205.30	в	(P-5556)
					2735.Ap.A	A. em	(P-4458)	205.40	вш	(P-5556)

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	12, 1992			P-3/43) D-0820/01: O-17702/01)	1; O-1/ /92/91) 4-1585)	(2021 :																																								(P-10303/91; O-17791/91;	A-1538)
	June	(P-3745)	(P-3745)	(F-3/45)	R-1713: A-1585)	(P-5582)	(P-5582)	(P-5582)	· (P-5582)	(P-5582)	(P-5582)	(P-5582)	(P-5582)	(P-5582)	(P-5582)	(r-3382)	(P-5582)	(P-5582)	(F-5582)	(P-5582)	(F-5582)	(P-5582)	(P-5582)	(P-5582)	(P-5582)	(P-5582)	(P-5582)	(P-5582)	(F-5582)	(F-5582)	(P-10303/	R-1702; A-1538)															
		=	am	E .		am	am	am	am	am	u	u	am	u	am		1	: 4:	. =	am	*	п	≉:	a	a	a	am	E C	ı =	*	u	п	4 :	a	a !	a me	_	**	am	*	-	L	L	e !		l .	
ILLINOIS REGISTER	SECTIONS AFFECTED INDEX	365.803	365.903	503.1101	001:100	611.101	611.102	611.110	611.111	611.112	611.295	611.296	611.300	611.301	611.310	611.311	611 591	611.592	611.600	611.601	611.602	611.602	611.603	611.603	611.604	611.605	611.606	611.608	611.609	611.610	611.610	611.611	611.630	611.631	611.640	611.645	611.646	611.647	611.647	611.648	611.648	611.650	611.65/	011.038	611.631 611 An A	615.101	
ILLINOI	#24		(P-17523/91; A-7377)	(F-1/323/91; A-/3//)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-17523/91; A-7377)	(P-1/523/91; A-/3//)	(F-1/323/91; A-/377) (B-17471/01: A-7230)	(P-17481/91: A-7346)	(P-17481/91: A-7346)	(P-17481/91; A-7346)	(P-1/481/91; A-7346)	(P-1/481/91; A-/346)	(F-1/481/91; A-7346)	Ŕ	(P-17481/91; A-7346)	(F-15202/91; A-5891)	(F-13202/21, A-3691) (P-3745)	(P-3745)	(P-3745)	(P-3745)	(P-3745)	(P-3745)	(P-3745)	(P-3/45)	(F-3/43)	(F-3/43) (P-37/5)	(P-3745)	(P-3745)										
	Issue	T'D)	am		a m	am m	am	am	аш	am	am	am	аш	am	E I	1 8	! E	am	am	am	am	аш	am	аш	аш	am	am		am	am	am	am	am	am m				am	аш	am	аш	ВШ	ВШ	H I			E E
	Volume 16,	TITLE 35 (CONT'D)	307.2401	307.2402	307,2404	307.2405	307.2406	307.2407	307.2490	307.3100	307.3109	307.3115	307.3119	307.3120	307.3124	300 103	310 103	310.105	310.107	310.110	310.201	310.202	310.210	310.220	310.221	310.222	310.230	310.233	310.330	310.510	310.611	310.613	310.633	310.635	360.601	365.103	365.104	365.203	365.304	365.401	365.402	365.403	365.404	365.405	365.503	365.603	365.604
	June 12, 1992	(P-16564/91; A-7880)	(P-16564/91; A-/880)	(P-16564/91: A-7880)	(P-16564/91; A-7880)	(P-41; A-8204)	(P-16564/91; A-7880)	(P-41; A-8204)	(P-41; A-8204)	(P-16564/91; A-7880)	(P-16564/91; A-7880)	(P-16564/91; A-7880)	(P-16564/91; A-7880)	(F-10304/91; A-7880)	(F-4002) (P-6635)	(P-4170)	(P-11059/91; A-3132)	(P-4170)	(P-4693)	(P-6643)	(P-4693)	(P-4184)	(P-4184)	(F-66/6)	(F-4200)	(F-4200) (P-12100/01: A-6184)	(F-12109/91, A-0184)	(P-12109/91; A-6184)	(P-12109/91; A-6184)	(P-12109/91; A-6184)	(P-16; A-8185)	(P-16; A-8185)	(P-16; A-8185)	(F-22; A-8191)	(F-22, A-8191) (P-27: A-8191)	(P-22; A-8191)	(P-22; A-8191)	(P-22; A-8191)		(P-22; A-8191)	(P-22; A-8191)	(F-22; A-8191)	(F-22; A-8191) (P-22: A-8191)	(F-22, A-6121) (P-17026/01: W-7511)	(P-7302)	(P-17523/91; A-7377)	(P-17523/91; A-7377)
		am	an a	= =		аш	u	am	аш	a	a	a	=			1 5	п	аш	am	аш	аш	am	=	аш	E ,	= 8	I	a ma	u	u	am	=	.			аш	аш	am	аш	am	аш	E I	E 8	.		am	am
ILLINOIS REGISTER	SECTIONS AFFECTED INDEX	212.302	212.309	212.324	212.362	212.424	212.425	212.443	212.445	212.458	212.464	212.II. D	212.II. E	212.II. F	215.100	215.123	215.215	215.583	218.103	218.104	218.106	218.583	218.586	219.104	219.383	240 100	240.102	240.122	240.140	240.141	243.108	243.120	243.121	244.101	244.100	244.121	244.161	244.162	244.163	244.166	244.167	244.168	244.169 244.An D	303 203	203.505	307.1101	307.2400
ILLINOI	SECTIONS A							_				•				,						•	(P-1474; A-9115)	(P-14/4; A-9115)	(F-14/4; A-9115)	(F-14/4; A-9113) B 1474: A 0115)	(F-14/4; A-9113) (B-1474: A-9115)	P-1474; A-9115)	(P-1474; A-9115)							,			(P-15875/91;A-7656)	(P-15875/91;A-7656)	((P-16564/91; A-7880)	(F-16364/91; A-7880)	(F-10304/91; A-7660)	(F-16564/91; A-7880)	A-8204)	(P-16564/91; A-7880)
	#24		(P-2003) (P-2003)	(F-2003)	(P-2003)	(P-2003)	(P-2003)	(P-2003)	(P-2984)	(P-2984)	(P-2984)	(P-2984)	(P-2984)	(F-2984)	(F-2964)	(P-2984)	(P-2984)	(P-2746)	(P-2739)	(P-2739)	(P-2739)	(P-2739)	(P-1474;	(P-14/4	(F-14/4	(F-14/4)	(F-14/4 (0-1474)	(P-1474)	(P-1474;	(P-4163)	(P4163)	(P-4163)	(P-4163)	(F-4163)	(F4103) (P4163)			(P-6631)	(P-1587.	(P-1587.	(P-6606)	(P-1656	(F-1050	(F-1050	(F-1656	(P-41; A-8204)	(P-1656
	Issue #24		a 1	= =			a	a	am	am	ш	ш	.	.	L 1			E E	аш	am	am	am	am	Ш	аш	He I		am	u	a	u	a	a	=	= :	=		am	am	am		a	= 1	u			c
	Volume 16,	TITLE 32	210.10	210.20	210.40	210.50	210.60	210.70	331.110	331.120	331.130	331.200	331.Ap.A	331.Tb.A	331.10.B	331 An B	331. Ap.C	340.4010	400.120	400.140	400.150	400.160	401.70	401.110	401.130	401.140	401.130	401.Ap.B	401.Ap.C	504.10	504.20	504.30	504.40	504.50	204.60	27:00	TITLE 35	203.145	211.101	211.122		212.107	212.108	212.109	212.110		212.210

STER	616.211	100	010.301	616.302	616.303	616.304	306	010.303	616.306	616.307	416 401	10t.0	616.402	616.421	616.422	707 700	0.423	616.424	616.425	616.441		616.442	616.443 n	616.444 n		010.445 m	616.446 n	616.447 n	616.462 n		616 463
ILLINOIS REGISTER TIONS AFFECTED IND	61		0	61	61	61	5	10	19	61	19	5	91	61	61	3	10	61	61	19	;	19	19	19	17	5	19	61	610		610
#24 SEC1		(P-10303/91; O-17791/91;	(P-10303/91; O-17791/91;	R-1702; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538)	(F-10505/91; O-17/91/91; R-1702; A-1538)	(P-10303/91; O-17791/91; P-1702: A-1539)	(P-10303/91; O-17791/91;	R-1702; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538)	R-1702; A-1538)	(P-10303/91; O-17791/91; R-1702: A-1538)	(P-10303/91; O-17791/91; P-1702: A-1538)	(P-9836/91; O-17793/91;	R-1723; A-1592)	R-1723; A-1592)	(P-9836/91; O-17793/91; P-1773: A-1502) (P-7205)	(P-9836/91; O-17793/91;	R-1723; A-1592) (P-9836/91;O-17793/91;	R-1723; A-1592)	(P-9836/91; O-17793/91; P-1773 - A-1592)	(P-9836/91;O-17793/91;	(P-9836/91; O-17793/91;	R-1723; A-1592)	R-1723; A-1592)	(P-9836/91; O-17793/91;	(P-9836/91; O-17793/91;	R-1723; A-1592) (P-9836/91; O-17793/91;	R-1723: A-1592)	(P-9836/91: O-17793/91:
Issue	NT'D	п	а	п	1	a	п	а	а	а	=	1	a	п	п	1	=	a	п	a		п	п	a		=	а	п	а		=
Volume 16,	TITLE 35 (CONF'D)	615.623	615.624	615.701	505 303	013.702	615.703	615.704	615.705	615.721	615.722		015.723	615.724	616.101	616 100	701.010	616.104	616.105	616.201		616.202	616.203	616.204	506 919	07:010	616.206	616.207	616.208		616.209
June 12, 1992	(P-10303/91; O-17791/91; P-1702, A-1538)	K-1/02; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538)	R-1702; A-1538)	(P-10303/91;-17791/91; R-1702: A-1538)	(P-10303/91; O-17791/91;	K-1702; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538)	(F-10303/91; O-17/91/91; R-1702; A-1538)	(F-10303/91; O-17/21/91; R-1702; A-1538)	(P-10303/91; O-17791/91; R-1702; A-1538	(P-10303/91; O-17791/91; P-1702: A-1538)	(P-10303/91;O-17791/91;	, R-1702; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538)	(P-10303/91; O-17791/91; R-1702: A-1538)	(P-10303/91; O-17791/91;	R-1/02; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538)	(F-10203/91, O-17791/91, R-1702; A-1538)	(P-10303/91; O-17791/91;	K-1/02; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538) (P-10303/91: O-17791/91:	R-1702; A-1538)	(P-10303/91; O-17/91/91; R-1702: A-1538)	(P-10303/91; O-17791/91;	R-1702; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538)	R-1702; A-1538)	(P-10303/91; O-17791/91;	R-1702; A-1538)
×	а	2		đ	¤	п	п	ı	a :	4	a	а	п	п			а	п	•	đ	a	=	=	ı	a	a	=	1 (=	a	
ILLINOIS REGISTER TIONS AFFECTED INDEX	615.404	615.421	616 422	774:510	615.423	615.424	615.425		013.441	74-610	615.443	615.444	615.445	615.446	;	015.44/	615.461	615.462	277 313	015.465	615.464	615.501	615.502		615.601	615.602	615.603	707 313	10.010	615.621	
ISSUE #24 SECTIONS AF	0 10303/01. O 17701/01.	(P-10303/91; O-17791; R-1702; A-1538)	(P-10303/91; O-17791/91; P-1703: A-1529)	(P-10303/91; O-17791/91;	R-1702; A-1538) (P-10303/91: O-17791/91:	R-1702; A-1538)	(P-10303/91; O-17791/91; R-1702; A-1538)	(P-10303/91; O-17791/91;	K-1/02; A-1538) (P-10303/91; O-17791/91; F 1703, A 1538)	(P-10303/91; O-17791/91;	R-1702; A-1538) (P-10303/91; O-17791/91;	R-1702; A-1538)	(r-10303/21;O-17721/91, R-1702; A-1538)	(P-10303/91;O11791/91; R-1702: A-1538)	(P-10303/91; O-17791/91;	R-1/02; A-1538) /P-10303/91: O-17791/91:	R-1702; A-1538)	(F-10303/91; O-17791/91; R-1702; A-1538)	(P-10303/91; O-17791/91;	(P-10303/91; O-17791/91;	R-1702; A-1538)	(P-10303/91;0-17791/91; R-1702; A-1538)	(P-10303/91; O-17791/91; R-1702: A-1538)	(P-10303/91; O-17791/91;	R-1702; A-1538) (P-10303/91: O-17791/91:	R-1702; A-1538)	(P-10303/91; O-17791/91; R-1702: A-1538)	(P-10303/91; O-17791/91;	(P-10303/91; O-17791/91;	R-1702; A-1538)	(P-10303/91; O-17791/91;
- 1	T'D	п	п	a	-	1	a	п	п	п	а	1	=	п	п	=		a	п	п		п	п	п	Ę		a	п	а		a
Volume 16,	TITLE 35 (CONT'D	013.102	615.103	615.104	615.105		615.201	615.202	615.203	615.204	615.205	706 317	007:010	615.207	615.208	615.209		013.210	615.211	615.301		615.302	615.303	615.304	615.305		615.306	615.307	615.401		615.402

R-1723; A-1592) (P-9836/91; O-17793/91; R-1723; A-1592) (P-9836/91; O-17793/91;

(P-9836/91; O-17793/91; R-1723; A-1592) (P-9836/91; O-17793/91;

R-1723; A-1592) (P-9836/91; O-17793/91;

R-1723; A-1592) (P-9836/91; 0-17793/91; R-1723; A-1592) (P-9836/91; 0-17793/91; R-1723; A-1592) (P-9836/91; 0-17793/91;

R-1723; A-1592) (P-9836/91; O-17793/91;

R-1723; A-1592) (P-9836/91; O-17793/91;

(F-1723; A-1592) (P-9836/91; O-17793/91; (P-9836/91; O-17793/91; (P-9836/91; O-17793/91; (F-9836/91; O-17793/91; (F-9836/91; O-17793/91; (R-1723; A-1592)

R-1723; A-1592) (P-9836/91; O-17793/91; R-1723; A-1592) (P-9836/91; O-17793/91; R-1723; A-1592) (P-9836/91; O-17793/91; R-1723; A-1592) (P-9836/91; O-17793/91; R-1723; A-1592)

(P-9836/91; O-17793/91; R-1723; A-1592) (P-9836/91; O-17793/91; R-1723; A-1592) (P-9836/91; O-17793/91; R-1723; A-1592) (P-9836/91; O-17793/91;

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R-1723; A-1592) (P-9836/91; O-17793/91;

R-1723; A-1592) (P-9836/91; O-17793/91;

(P-9836/91; O-17793/91; R-1723; R-1723; A-1592)

A-1592)

TITLE 35 (CONT'D)	VI'D)		703.155	am	(P-1058)	TITLE 35 (CONT'D
616.501	а	(P-9836/91; O-17793/91;	703.157	am	(P-1058)	726.209
		R-1723; A-1592)		п	(P-1058)	726.210
616.502	п	(P-9836/91; O-17793/91;		am	(P-1058)	726.211
		R-1723; A-1592)		п	(P-1058)	726.212
616.601	a	(P-9836/91; O-17793/91;	703.280	an i	(P-1058)	726.219
616 600	,	K-1/23; A-1392)	<		(F-1038)	726.Ap.A
010.007	a	(F-9830/91; O-17 /93/91; R-1773: A-1592)			(F-1038) (P-791)	726.Ap.B
616.603	a	(P-9836/91;O-17793/91;		E	(P-791)	726 Ap. D
		R-1723; A-1592)		am	(P-820)	726.Ap.E
616.604	а	(P-9836/91; O-17793/91;	721.103	am	(P-820)	726.Ap.F
		R-1723; A-1592)		am	(P-820)	726.Ap.G
616.605	a	(P-9836/91; O-17793/91;		ш	(P-820)	726.Ap.H
;		R-1723; A-1592)		am	(P-820)	726.Ap.I
616.621	a	(P-9836/91; O-17/93/91; B-1733: A-1503)	721.131	E	(F-820) (F-15910/91; A-2600)	726.Ap.J
616.622	=	(P-9836/91:O-17793/91:	721.132	am	(P-820)	726.Ap.K
		R-1723; A-1592)	-	am	(P-9288/91; A-2155)	726.Tb.A
616.623	п	(P-9836/91; O-17793/91;	_	am	(P-9288/91; A-2155)	728.107
		R-1723; A-1592)	<u>~</u>	аш	(P-9288/91; A-2155)	728.109
616.624	a	(P-9836/91; O-17793/91;		ВШ	(P-1112)	728.110
,		R-1723; A-1592)		ш	(P-1112)	728.111
616.625	a	(F-9830/91; O-17/93/91; B 1723: A 1602)	724.412		(F-1123)	728.112
107 717	5	K-1/23; A-1392) (P-9836/91-O-17793/91-			(F-1123) (P-1123)	728.113
010.701	=	R-1723: A-1592)			(F-1123)	728.133
616.702	а	(P-9836/91; O-17793/91;		аш	(P-875)	728.140
		R-1723; A-1592)		am	(P-875)	728.142
616.703	a	(P-9836/91; O-17793/91;		am	(P-875)	728.144
		R-1723; A-1592)		E E	(P-875)	728.Ap.D
616.704	a	(P-9836/91; O-17793/91		вш	(P-875)	728.Ap.E
200		R-1723; A-1592)		E :	(P-8/5)	728.Ap.G
010./03	=	(F-9830/91; O-17 /93/91; D 1773: A 1503	775 057		(F-8/3) (P-875)	728.Ap.H
616 721	•	(P-9836/91-O-17793/91-		į .	(P-1148)	728.Ap.1
17/:010	:	R-1723: A-1592)	726.131		(P-1148)	728.10.A
616.722	•	(P-9836/91; O-17793/91;	726.132	_	(P-1148)	728.Th.C
		R-1723; A-1592)	726.133		(P-1148)	728.Tb.D
616.723	a	(P-9836/91; O-17793/91;	726.134		(P-1148)	728.Tb.E
		R-1723; A-1592)	726.135	L	(P-1148)	731.110
616.724	a	(P-9836/91; O-17793/91;		BIII	(P-1148)	731.111
		R-1723; A-1592)	726.200	a	(P-1148)	731.112
616.725	a	(P-9836/91; O-177/93/91;	726.201	= 1	(P-1148)	731.113
617 101	=	(P-9882/91: O-17794/91	726.203	: =	(P-1148)	731.114
101:110	1	R-1734; A-1639)	726.204	: =	(P-1148)	731.120
617.102	a	(P-9882/91; O-17794/91;	726.205	=	(P-1148)	731.122
		R-1734; A-1639)	726.206	=	(P-1148)	731.130
620.450	am m	(P-7286)	726.207	п	(P-1148)	731,131
703 150		(1050)			:::!	

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P-1058)	TITLE 35 (CONT'D)	(C.L			731.133		(P-2330; A-7407)
P-1058)	726.209	a	(P-1148)		731.134	.	(P-2330; A-7407)
(P-1058)	726.210	u	(P-1148)		731.140	L	(P-2330; A-7407)
(F-1058)	726.211	•	(P-1148)		731.141	_	(P-2330; A-7407)
(F-1058)	726.212	a 1	(P-1148)		731.142	_	(P-2330; A-7407)
P-1058)	726 An A	=	(F-1148)		731.143	L 1	(F-2330; A-7407)
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(P-820)	726.Ap.E	a	(P-1148)		731.152		(P-2330; A-7407)
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(P-820)	726.Ap.G	a	(P-1148)		731.161	am	(P-2330; A-7407)
(P-820)	726.Ap.H	•	(P-1148)		731.162	аш	(P-2330; A-7407)
(P-820)	726.Ap.I	a	(P-1148)		731.170		(P-2330; A-7407)
(P-820) (P-15910/91;	726.Ap.J	a	(P-1148)	>	731.171	L	(P-2330; A-7407)
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P-820)	726.Ap.L	a	(P-1148)		731.173	L	(P-2330; A-7407)
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F-1112)	728.110	a	(P-916)		731.192	_	(P-2330; A-7407)
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(P-875)	728 140		(F-916)		731.197	L 1	(P-2330; A-7407)
(P-875)	728 142	T C	(F-916) (P-916)		731 100	٠, ١	(F-2330; A-7407)
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(P-875)	728.Ap.G	am	(P-916)		731.204	u	(P-2330; A-7407)
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1148)	728.Tb.E	am	(P-916)		731.211	_	(P-2330; A-7407)
(F-1148) (P-1148)	731.110	am	(P-2330; A-7407)	1-7407)	731.Ap.A	E	(P-2330; A-7407)
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(F-1146) D-1148)	731.112	am	(P-2330; A-7407)	-7407)	809.901	L	(P-13017/91; A-130)
(F-1148)	731.113	am	(P-2330; A-7407)	1-7407)	809.902	L	(P-13017/91; A-130)
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1148)	731.130	L	(P-2330; A-7407)	-7407)	848.101	am	(P-13004/91; A-3114)
F-1148)	731.131	L	(P-2330; A-7407)	-7407)	848.202	am	(P-13004/91; A-3114)
TAX.							

Time 12 1992	121	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-18013/91; A-4826)			(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-1433//91; A-3940)	(P-1433//91; A-3940)	(P-14337/91, A-3940)	(P-14337/91: A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-14337/91; A-3940)	(P-7141)	(P-7141)	(P-7141)	(P-7141)	(P-7141)	(P-7141)	(P-7141)	(F-/141)													
		L	1	L	-	L	te	u	4	L	ı	am			аш	am	u	am	ъ	am	am	am	am	а	а	E 1	= =	= =	am	L	L	a	а	а	а	a	u	E	п	u	-	E	a	= 1	a						
ILLINOIS REGISTER	TOTAL THEFT	950.210	950.220	950.230	950.240	950.250	950.260	950.270	950.280	950.290	950.300	5030,130		TITLE 47	100.10	100.20	100.30	100.40	100.50	100.85	100.103	100.105	100.106	100.110	100.111	100.113	100.115	100.120	100.Ap.A	.II.A	8.II.B	::::	іі Э п	: =: :: =:	100.Ap.D	100.Ap.E	100.Ap.F	110.210	110.220	110.230	110.240	110.250	110.260	110.270	110.280	110.290	110.300	110.310	110.320	110.330	110.340
#24	r J		(P-15823/91; A-6808)	(P-15823/91; A-6808)	(P-15823/91; A-6808)	(P-15823/91; A-6808)	(P-10875/91; A-4845)	(P-10875/91; A-4845)	(P-10875/91; A-4845)	(P-10875/91; A-4845)	(P-10875/91; A-4845)	(P-1954)	(P-1954)	(P-1954)	(P-1954)	(P-1954)	(P-1954)	(F-1934) (P-1064)	(P-14845/91: A-6842)	(P-14845/91; A-6842)	(P-14845/91; A-6842)	(P-14845/91; A-6842)	(P-14845/91; A-6842)	(P-14845/91; A-6842)	(P-14845/91; A-6842)	(P-14845/91; A-6842)			(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(P-3695)	(F-3695)															
Tegno	9		am	am	am	a	а	п	а	а	аш	am	am	а	п	п	а	а	а	а	а	а	а	а	a	а	а	а	а	а	а	a :	= 6	= =	1 4	а	а	а	а	а	а			L	L	-	-	L	-	L	L
Volume 16		TITLE 41	120.10	120.900	120.1000	120.1010	120.1020	120.1030	120.1040	120.1041	120.1100	120.1200	120.1280	120.Ap.B	170.800	170.810	170.820	170.830	170.840	170.850	170.860	170.870	170.880	170.890	170.900	170.910	215.1	215.2	215.20	215.30	215.40	215.50	215.00	270.10	270.20	270.30	270.40	270.50	270.60	270.70	270.80		TITLE 44	950.110	950.120	950.130	950.140	950.150	950.160	950.170	950.180
June 12, 1992) 	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(F-/250)	(F-7250)	(F-7250)	(P-7250)	(P-7250)	(P-7250)	(P-7250)	(P-5391)	(P-5391)	(P-5395)	(P-5395)	(P-14394/91; A-4881)	(P-14394/91; A-4881)	(P-14394/91; A-4881)	(P-2763) (E-2915)	(P-14406/91; A-4891)					
		п	п	п	п	a	п	п	п	п	п	ū	а	а	а	а	а	c	а	а	а	а	а	а	a	а	a	E	E	a	= 1	= 1	1 6		ı a	а	a	a	а	а	а	am	am	am	am	am	аш	аш	am	am	
ILLINOIS REGISTER SECTIONS AFFECTED INDEX		200.230	200.235	200.240	200.245	200.250	200.270	200.280	200.290	200.310	200.320	200.400	200.402	200.404	200.406	200.408	200.410	200.412	200.414	200.416	200.418	200.420	200.422	200.424	200.426	200.428	200.430	200.432	200.434	200.436	200.438	200.440	200.442	200.446	200.448	200.450	200.452	307.10	307.20	354.10	354.20	400.130	400.141	400.142	450.440	450.1010	450.1250	450.1335	450.1340	1075.120	
Issue \$24 SECTIONS AF			n (P-13004/91; A-3114)	n (P-13004/91; A-3114)	n (P-13004/91; A-3114)	r (P-13265/91; A-2880)	am (P-4621)	n (P-8348/91; A-6995)	п (Р-8348/91; А-6995)	n (P-8348/91; A-6995)	n (P-8348	n (P-6127)	n (P-6127)	n (P-6127)					n (F-6127)	(F-6127)			(P-6127)	n (P-17016/91; A-2594)	n (P-17016/91; A-2594)		•	n (P-7250)	n (P-7250)	п (Р-7250)	n (P-7250)	n (P-7250)	n (P-7250)		n (P-7250)			n (P-7250)	n (F-7.20)												
16. Is		CONT'I				4	be .	h	bet met-	L														u							_						-			u (u (-									
Volume		TITLE 35 (CONT'D)	848.206	848.207	848.208	849.101	849.102	849.103	849.104	849.105	849.106	858.207	859.101	859.102	859.103	859.201	859.202	859.203	859.204	859.205	859.301	859.302	859.303	880.100	880.101	880.102	880.103	880.104	880.105	880.106	880.200	880.201	880 203	880.300	880.301	1420.101	1420.102		TITLE 38	200.100	200.110	200.155	200.160	200.165	200.200	200.205	200.210	200.215	200.220	200.221	57 7.007

101.0802								SECTIONS AFFECTED INDEA		3001 121 DIE
10.803		310.802	аш	(P-1961)	TITLE 50 (CON	(LD)		2008.Ap.D	п	(P-14859/91; PF-1743;
1018 864 mm (P-1961) 2008.72 mm (P-8766, C-3390) 2008.44p.D mm (P-1961) 2008.73 mm (P-1876) 2008.44p.D mm (P-1961) 2008.73 mm (P-1876) 2008.44p.D mm (P-1961) 2008.73 mm (P-1876) 2008.44p.D mm (P-1961) 2008.74 mm (P-1876) 2008.44p.D mm (P-1961) 2008.74 mm (P-1876) 2008.44p.D mm (P-1961) 2008.74 mm (P-1876) 2008.44p.D mm (P-1876) 2008.44p.	(P-7141)	310.803	am	(P-1961)	2008.72	=	(P-14859/91; PF-1743;	•		W-2956; A-2766; C-3590)
101 80.0	(P-7141)	310.804	am	(P-1961)			W-2956; A-2766; C-3590)	2008.Ap.D	am	(P-8768)
101 900	(P-13993/91; A-3078)	310.805	аш	(P-1961)	2008.72	am	(P-8768)	2008.Ap.E	3 t	(P-14859/91; PF-1743;
110 002	(P-13993/91; A-30/8)	310.806	E !	(P-1961)	2008.73	a	(P-14859/91; PF-1743;			W-2956; A-2766; C-3590)
110.913	(P-13993/91; A-3078)	310.901		(F-1901)			W-2956; A-2766; C-3590)	2008.Ap.E	-	(P-14859/91; PF-1743;
1008.75 1008.75 1008.75 1008.75 1008.75 1008.75 1008.75 1008.75 1008.75 1008.75 1008.75 1008.75 1008.75 1008.80 1008.75 1008.80 1008	(P-13993/91, A-3078)	310.302		(F-1961)	2008.73	AT .	(P-8/08)	1 0000		W-2956; A-2766; C-3590)
Title 50	(P-13993/91: A-3078)	350 213		(P-5185)	7008.74	=	(F-14839/91; FF-1/43;	2008.Ap.E	E I	(P-8/68)
THILE 50	(P-13241/91: A-2120)		1	(F-5369: M-9137)	30,000	4	W-2930; A-2700)	ZOVO.Ap.r	=	(F-14639/91; FF-1/43;
THILE 50	(P-13241/91: A-2120)			(1517 11 (1505)	50007	ŧ	(F-14639/91; FF-1/43; W-2056: A.2766: C.3500)	2008 Am E		W-2536; A-2766; C-3390)
992.20 am (P4159) 2008.80 am (P4289) 2008.81 r (P4859) 1 P-1743; 2008.4p. 1 n (P4859) 202.4 n (P4859) 1 P-1743; 2008.4p. 1 n (P4859) 1 P-1743; 2008.1p. 1 n (P4859) 1 P-1743; 2008.1p. 1 n (P4859) 1 P-1743; 2008.4p. 1 n (P4859) 1 P-1743; 2008.1p. 1 n (P4859) 1 P-1743; 2008.4p. 2008.7p. 2008.7p.	(P-13241/91: A-2120)	TITI F 50			3000	į	W-2530, A-2700; C-5350)	2000 A 5	H I	(F-8/08)
992.20 992.20 992.20 992.20 992.40 99	(P-13241/91; A-2120)	904.30	am.	(P-4159)	2008.73	E	(F-14839/91; FF-1/43; W-2056: A 2766: C 2500)	2008.Ap.G	a	(F-14859/91; PF-1/43;
932.46 mm (P-7279) C2008.81 T (P-144599) PF-1743; C2008.4p.H mm (P-7279) C2008.82 mm (P-74599) PF-1743; C2008.4p.H mm (P-76729) C2008.4p.H mm (P	(P-13241/91: A-2120)	932.20	E	(F-7779)	00 0000		W-2536; A-2700; C-3330)	V 14 0000		W-2936; A-2706; C-3390)
932.60 mm (P-729)	(P-13241/91: A-2120)	937.40	E 8	(P-7779)	7008.80	E	(F-14639/91; FF-1/43;	2008.Ap.G	E	(F-8/08)
1408.10 10.008.40 1.0 1.448590	(P-1961)	932.60	E	(P-7779)			W-2936; A-2766; C-3390)	Z008.Ap.H	a	(F-14839/91; PF-1/43;
108.20 1.06.20 1.06.20 1.00.	(F. 1961)	1408 10		(P-8735)			(F-8/08)	* 0000		W-2936; A-2/66; C-3390)
1408.30	(F 1961)	1408 20	: 1	(CC (C-1)	7008.81	-	(F-14859/91; PF-1/43;	2008.Ap.H	am	(F-8/68)
1408.40 10 (7-8725) 2008.81 10 (7-14459); [PF-1743; 2008.4p.] 1408.50 10 (P-8725) 2008.81 10 (P-144590); [PF-1743; 2008.4p.] 1408.80 10 (P-8725) 2008.82 10 (P-84590); [PF-1743; 2008.4p.] 1408.80 10 (P-8725) 2008.80 10 (P-8725) 2008.90 10 (P-8725) 2008.4p.] 1408.80 10 (P-8725) 2008.90 10 (P-8726) 2008.4p.] 1408.80 10 (P-8725) 2008.90 10 (P-8725) 2008.4p.] 1408.80 10 (P-8725) 2008.1p. 2008.1p. 2008.4p.] 1408.80 10 (P-8725) 2008.1p. 2008.4p.] 1408.80 10 (P-88599); [PF-1743; 2008.1p. 2008.4p.] 10 (P-88599); [PF-1743; 2008.4p.] 10 (P-88599); [PF-1743; 2008.4p.] 10 (P-88599); [PF-1744; 2008.1p. 2008.4p.] 10 (P-88599); [PF-1744; 2008.4p.] 10 (P-88599); [(D-1961)	1408.20	= 1	(F-8735)			W-2956; A-2766)	2008.Ap.1	a	(P-14859/91; PF-1743;
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1408.50	(F-1961)	1408.40	=	(P-8/25)			W-2956; A-2766)	2008. Ap. I	am	(P-8768)
1408.60 n (Ps725)	(P-1961)	1408.50	a	(P-8725)	2008.81	am.	(P-8768)	2008.Ap.J	п	(P-14859/91; PF-1743;
1408.80 n (Ps725)	(P-1961)	1408.60	=	(P-8725)	2008.82	шв	(P-14859/91; PF-1743;			W-2956; A-2766; C-3590)
1408.80	(P-1961)	1408.70	п	(P-8725)			W-2956; A-2766)	2008.Ap.J	am	(P-8768)
1488.90 n (P-8725)	(P-1961)	1408.80	п	(P-8725)	2008.90	am	(P-14859/91; PF-1743;	2008.Ap.K	a	(P-14859/91; PF-1743;
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C-3590) C-3590) C-3580 (P-14859/91; PF-1743; 2008.103 am (P-14859/91; PF-1743; W-2956; A-2766; C-3590) 2008.50 am (P-14859/91; PF-1743; 2008.104 am (P-14859/91; PF-1743; 2008.Ap.N n W-2956; A-2766; C-3590) 2008.60 am (P-14859/91; PF-1743; 2008.10 am (P-14859/91; PF-1743; 2008.Ap.N n W-2956; A-2766; C-3590) 2008.61 r (P-14859/91; PF-1743; 2008.Ap. A am (P-14859/91; PF-1743; 2008.Ap. O am (P-14859/91; PF-1743; 2015.10 am (P-14859/91; PF-1743; 2015.40 am (P-14859/91; PF-1743; 2015.40 am (P-14859/91; PF-1743; 2015.50	(P-1961)			W-2956: A-2766:			W-2536; A-2700; C-3330)	WI-47-0002	alli	W 2066. A 2766. C 2500)
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| (E-7502) | (P-3734) | (P-14014/91; A-2122) | (P-14014/91; A-2122) | (P-3734) | (P-13252/91; A-113) | (P-3734) | (P-3248; A-8173) | (P-3248; A-8173) | (P-785) | (P-14023/91; A-3993) | (P-14023/91; A-3993) | (P-14023/91; A-3993)
 | (P-14023/91; A-3993) | (P-14023/91; A-3993) | (P-14023/91; A-3993) | (P-14032/91; A-2131) | (P-14032/91; A-2131)
 | (P-14032/91; A-2131) | (P-14032/91; A-2131) | (P-13257/91; A-118) | (P-10521/91; A-7838) | (P-10521/91; A-7838)
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| 2725.2 | 2725.100 | 2725.105 | 2725.115 | 2725.225 | 2725.237 | 2725.245 | 2732.203 | 2732.220 | 2732.305 | 2760.110 | 2760.120 | 2760.125
 | 2760.130 | 2760.145 | 2760.150 | 2765.45 | 2765.55
 | 2765.60 | 2765.68 | 2770.110 | 5300.10 | 5300.20
 | 5300.30 | 5300.40 | 5300.210 | 5300.310 | 5300.450
 | 5300.460 | 5300.550 | 5200.560 | 5200.570
 | 5300.610 | 5300 630 | 5300 640 | | | 5300.720
 | 5300.730 | 5300,735 | 5300.745 | 5300.750 | 5300.760 | 5300.765 | 5300.770 | 5300.782
 | 5300.783 | 5300.784 | 5300.785 | 5300.786 |
| | (P-4645; C-6057) | (P-4645; C-6057) | (P-4645; C-6057) | (P-4645; C-6057) | (P-4645; C-6057) | (P-4645; C-6057) | (P-4645; C-6057) | (P-4645; C-6057) | (P-4645; C-6057) | (P-4645; C-6057) | (P-8838) | (P-8838)
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 | (P-1469) | (P-1469) | (P-1469) | (P-6905) | (P-12964/91; A-6175)
 | (P-12964/91; A-6175) | (F-12964/91; A-61/5) | (F-12964/91; A-01/3) | (F-12964/91; A-01/3)
 | (F-12964/91; A-01/3) | (P-12964/91: A-6175) | (P-12964/91: A-6175) | | | (P-8081/91: A-1524)
 | (P-1154591; A-6796) | (P-8081/91; A-1524) | (P-14343/91; A-2556) | (E-7506) | (P-14343/91; A-2556) | (P-14343/91; A-2556) | (P-14343/91; A-2556) | (P-14343/91; A-2556)
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| TITLE S6 (CON | 350.420 | 350.430 | 350.440 | 350.450 | 350.460 | 350.Ap.A | 350.Ap.B | 350.Ap.C | 350.Ap.D | 350.Ap.E | 360.100 | 360.110
 | 360.120 | 360.130 | 360.140 | 360.150 | 360.160
 | 360.170 | 360.180 | 1700.10 | 1700.20 | 1700.30
 | 1700.40 | 1700.50 | 1700.60 | 2610.130 | 2620.10
 | 2620.20 | 2070.30 | 2020.40 | 2070.30
 | 2620.60 | 2620.80 | 2620.90 | 2620.100 | 2625.55 | 2630.82
 | | 2630.83 | 2720.1 | 2720.2 | 2720.5 | 2720.7 | 2720.10 | 2720,108
 | 2720.130 | 2720.215 | 2720.240 | 2720.315 |
| | | (P-4626; C-6897) | (P-4626; C-6897) | (F-4626; C-6897) | (P-4626; C-6897) | (F-4620; C-6897) | (F-40.26; C-0897) | (F-46.26; C-6897) | (P-4626; C-6897) | (F-46.26; C-689.7) | (P-4626; C-6897) | (P-4626; C-6897)
 | | | (P-4626; C-6897) | (P-4626; C-6897) |
 | (P-4626; C-6897) | | | (P-4626; C-6897) | (P-4626; C-6897)
 | (P-4626; C-6897) | (P-4626; C-6897) | (P-4626; C-6897) | (F-4020; C-0697) | (F-4626; C-6897)
(P-4626: C-6807)
 | (F-4626, C-6897) | (F-4626: C-6897) | (F-4626; C-6897) | (F 4626; C-6897)
 | (P-4626; C-6897) | (P-4626; C-6897) | | (P-4626; C-6897) | (P-4626; C-6897) | (P-4626; C-6897)
 | (P-4626; C-6897) | (P-4626; C-6897) | (P-4626; C-6897) | (P-4626; C-6897) | (P-4626; C-6897) | (P-1; A-8518) | (P-1) (P-3780; A-8518) | (P-3260)
 | (P-3260) | (P-3260) | (P-4645; C-6057) | (F-4643; C-6037) |
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 | 300.720 | 300.730 | 300.740 | 300.750 | 300.760
 | 300.770 | 300.780 | 300.790 | 300.800 | 300.810
 | 300.820 | 300.830 | 300.840 | 300.630 | 300.860
 | 300.880 | 300.890 | 300,900 | 300,910
 | 300.920 | 300,930 | 300.940 | 300.950 | 300.960 | 300.970
 | 300.980 | 300.990 | 300.1000 | 300.1010 | 300.1020 | 350.10 | 350.280 | 350.290
 | 350.300 | 350.310 | 350.400 | 350.410 |
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| | (CONT'D) TITLE 56 (CONT'D) 2725.2 n (E | 300.440 n (P-4626; C-6897) TITLE 56 (CONT'D) 2725.2 n (E-7506) 300.450 n (P-4626; C-6897) 350.420 n (P-4645; C-6057) 2725.100 am (P | (E-7506) 300.440 (P-4626; C-6897) TITLE 56 (CONT'D) 2725.2 n (E-7506) 300.450 (P-4626; C-6897) 350.420 n (P-4645; C-6057) 2725.100 am (E-7502) 300.460 n (P-4626; C-6897) 350.430 n (P-4645; C-6057) 2725.105 am | (E-7506) 300.440 n (P-4626; C-6897) TITLE 56 (CONT'D) (P-4645; C-6057) n 2725.2 n (E-7502) 300.450 n (P-4626; C-6897) 350.430 n (P-4645; C-6057) 2725.100 am (E-7502) 300.460 n (P-4626; C-6897) 350.430 n (P-4645; C-6057) 2725.105 am n (P-1524/91; A-5329) 300.500 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.115 am | (E-7506) 300.440 n (P-4626; C-6897) TITLE 56 (CONT'D) (CONT'D) 7725.100 am (E-7502) 300.450 n (P-4626; C-6897) 350.420 n (P-4645; C-6057) 2725.100 am (E-7502) 300.460 n (P-4626; C-6897) 350.430 n (P-4645; C-6057) 2725.105 am n (P-15244/91; A-5329) 300.500 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.115 am n (P-11055/91; A-126) 300.510 n (P-4626; C-6897) 350.450 n (P-4645; C-6057) 2725.125 am | (E-7506) 300.440 n (P-4626; C-6897) TITLE 56 (CONT'D) (P-4645; C-6057) n | CONITY CONITY CONITY Conity CF-7505 CF-7 | TITLE 56 (CONT'D) | CONITYD CONITYD CF-7506 300.440 | CONIT'D CF-7506 300.440 n (P-4626; C-6897) 350.420 n (P-4626; C-6897) 350.420 n (P-4645; C-6057) 2725.100 am n (E-7502) 300.450 n (P-4626; C-6897) 350.430 n (P-4645; C-6057) 2725.115 am n (P-17244/91; A-5329) 300.500 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.115 am (P-17013/91; A-5326) 300.510 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.225 am (P-17013/91; A-5326) 300.510 n (P-4626; C-6897) 350.460 n (P-4645; C-6057) 2725.237 n (P-4645; C-6057) 2725.237 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.237 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.237 n (P-4645; C-6057) 2725.237 n (P-4645; C-6057) 2725.237 n (P-4645; C-6057) 2725.237 n (P-4645; C-6057) 2725.230 n (P-1997) 2725.230 n (P-1997) 2725.230 n (P-1997) 2725.230 n (P-4645; C-6057) 272 | CONIT'D CF-7506 300.440 n (P-4626; C-6897) 350.420 n (P-4645; C-6057) 2725.100 am n (F-7502) 300.450 n (P-4626; C-6897) 350.420 n (P-4645; C-6057) 2725.105 am n (P-15244/91; A-5329) 300.500 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.135 am n (P-11055/91; A-126) 300.510 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.235 am n (P-11055/91; A-126) 300.520 n (P-4626; C-6897) 350.450 n (P-4645; C-6057) 2725.235 am n (P-11055/91; A-5326) 300.650 n (P-4626; C-6897) 350.450 n (P-4645; C-6057) 2725.235 am n (P-1997) 300.630 n (P-4626; C-6897) 350.4p.E n (P-4645; C-6057) 2725.235 am n (P-1997) 300.640 n (P-4626; C-6897) 350.4p.E n (P-4645; C-6057) 2725.235 am n (P-1997) 300.640 n (P-4626; C-6897) 350.4p.E n (P-4645; C-6057) 2725.235 am n (P-1997) 2725.235 am n (P-1997 | CONIT'D CANIT'D CANIT'D | CONITY CONI | CONITY CONI | CONITO CP-7506 300.440 n (P-4626; C-6897) 310.420 n (P-4626; C-6897) 350.420 n (P-4626; C-6897) 350.420 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.105 am n (P-1524/91; A-5329) 300.450 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.115 am n (P-1024/91; A-5329) 300.500 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.223 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.237 n (P-15244/91; A-5326) 300.510 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.237 n (P-1997) 300.610 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.237 n (P-1997) 300.610 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.237 n (P-1997) 300.610 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.237 n (P-1997) 300.610 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.237 n (P-1997) 300.610 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.236 n (P-1997) 300.610 n (P-4626; C-6897) 360.110 n (P-8838) 2760.110 am 360.710 n (P-4826; C-6897) 360.110 n (P-8838) 2760.120 am 40 n (P-1997) 300.710 n (P-4626; C-6897) 360.110 n (P-8838) 2760.125 am 40 n (P-1997) 300.710 n (P-4626; C-6897) 360.110 n (P-8838) 2760.125 am 40 n (P-1997) 300.710 n (P-4626; C-6897) 360.110 n (P-1893) 2760.145 am 40 n (P-1997) 300.710 n (P-4626; C-6897) 360.110 n (P-1893) 2760.145 am 40 n (P-1997) 300.710 n (P-4626; C-6897) 360.110 n (P-18938) 2760.145 am 40 n (P-1997) 300.710 n (P-4626; C-6897) 360.110 n (P-18938) 2760.145 am 40 n (P-1997) 300.710 n (P-4626; C-6897) 360.110 n (P-18938) 2760.145 am 40 n (P-1897) 300.710 n (P-4626; C-6897) 360.110 n (P-18938) 2760.145 am 40 n (P-1897) 360.110 n (P-4626; C-6897) 360.110 n (P-4626; C-689 | CONIT'D CP-7506 300.440 n PP-4626; C-6897 350.420 n PP-4645; C-6057 350.420 n PP-4645; C-6057 350.420 n PP-4645; C-6057 350.430 n PP-4626; C-6897 350.430 n PP-4645; C-6057 375.105 am PP-1055/44/91; A-5329 300.460 n PP-4626; C-6897 350.440 n PP-4645; C-6057 375.105 am PP-4645; C-6057 375.25 am PP-1055/44/91; A-5326 300.520 n PP-4626; C-6897 350.440 n PP-4645; C-6057 375.25 am PP-4645; C-605 | CONT'D C-7506 300.440 n (P-4626; C-6897) TITLE \$\text{s}(CONT'D C-7506 n (P-4626; C-6897) 350.420 n (P-4645; C-6057) 2725.100 nm (P-1724/91; A-5322) 300.450 n (P-4626; C-6897) 350.420 n (P-4645; C-6057) 2725.115 nm (P-17013/91; A-5326) 300.510 n (P-4626; C-6897) 350.440 n (P-4645; C-6057) 2725.22 nm (P-17013/91; A-5326) 300.510 n (P-4626; C-6897) 350.460 n (P-4645; C-6057) 2725.22 nm (P-1997) 300.520 n (P-4626; C-6897) 350.4p. 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	June	(P-14365/9	A-2576)	(P-3282)	(F-14363/5 A-2576)	(P-14365/9	A-2576)	(P-14365/9	A-2576)	(P-14365/9	A-2576) (I	A-2576)	(P-14365/9	A-2576) (I	(P-14365/9	A-2576)	A-2576)	(P-14365/9	A-2576)	(P-14365/9	A-2576)	(P-14365/9	A-2576)	(P-14365/9	A-2576)	(P-2719; /	(E-7897)		(P-8671)	(P-8671)	(P-8671)	(P-8671)	(P-8671)	(P-12094/	(P-12094/	(P-12094/	(P-12094/	(F-12094)	(F-12094) (P-12094)	(P-12094/	(P-12094/	(P-12094/	(P-12094/	(P-12094/	(P-12094/	(P-12094/) (P-12094/
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ILLINOIS REGISTER	SECTIONS AFFECTED INDEX	240.1430		240.1430	740.1440	240.1440		240.1450		240.1450	0341 045	740.1400	240.1460		240.1470	240 1500	740:1300	240,1500		240.1510		240.1520		240.1530		2501.37		TITLE 68	580.10	580.20	580.30	580.40	580.50	870.100	870.105	870.110	870.115	870.700	870.200	870.215	870.220	870.225	870.230	870.235	870.240	870.245 870.300
ILLINOIS	SECTIONS AF																							(P-14365/91; P-14679/91;		,						(P-14365/91; P-14679/91;			(P-14365/91; P-14679/91;		(P-14365/91; P-14679/91;	A-23/0) D-14365/01: D-14670/01:	(71; F-140/7/71;	(P-14365/91:P-14679/91:		(P-14365/91; P-14679/91;		(P-14365/91; P-14679/91;		,
	#24		(P-3267)	(P-3267)	(P-3267)	(P-3267)	(P-3267)	(P-3267)	(P-3316)	(P-3282)	(F-3282)	(F-3282) (P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-14365	A-2576)	(P-3282)	(F-5282) (P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-3282)	(P-14365	A-2576)		(P-14365	A-2576)	(P-14365	0.17365	(F-14503 A-2576)	(P-14365	A-2576)	(P-14365	A-2576)	(P-14365	A-2576)	
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	Volume 16,	TITLE 62 (CONT'D)	200.402	200.500	200.603	200.604	200.806	200.Ap.B	220.190	240.10	240.500	240.510	240.520	240.520	240.530	240.530	240.340	240.610	240.630	240.640	240.710	240.760	240.780	240.995		240.1110	240.1130	240.1160	240.1160	240.1170	240.1180	240.1400			240.1400		240.1405	01410	240.1410	240.1410		240.1420		240.1420		
Tune 12 1002		(P-8842)	(F-8842)	(P-8842)	(P-8842)	(P-8842)	(P-8842)	(F-8842)	(F-7; A-9006) (E-211) (P-7: A-9006) (E-211)	(F-7): A-9006) $(E-211)$	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(F-7; A-9006) (E-211) (P-7: A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)		(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(F-7; A-9006) (E-211)	(F-7; A-9006) (E-211)	(F-7; A-9006) (E-211)	(F-7; A-9000) (E-211) (P-7: A-9006) (E-211)	(P-7: A-9006) (E-211)		(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(F-7, A-9006) (E-211)	(F-7; A-9006) (E-211) (P-7: A-9006) (E-211)	(P-7: A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(P-7; A-9006) (E-211)	(E-2648)		(P-3267)	(P-3267)				
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SECUTIONS APPROMENTANDEY	FECTED INDE	130.200	130.210	130.230	130.240	130.250	130.Tb.A	130.16.B	132.10	132.20	132.25	132.30	132.35	132.40	132.50	132.55	132.60	132.65	132.70	132.75	132.80	132.85	132.90	132.93	132.105	132.110	132.115	132.120	132.125	132.130	132.135	132.140	132.145	132.156	132,160	132.165	132.170	132.Ap.A	132.Ap.B	Tp.A	Tb.B	Tb.C	135.30	C) fit limited	200.12	200.201
ILLINO			(P-10521/91; A-7838)		_	_		n (F-10521/91; A-7838)				Ĭ		n (P-1490; A-8529)		_	_	(P-7543) (E-7716)	5		(P-14363/91; A-2137)	(E-14663/91)						(P-8842)	(P-8842)	(P-8842)	(P-8842)	(P-8842)	(P-8842)	(F-804Z)	(F-8842)	(P-8842)	(P-8842)	n (E-2656)	(P-8842)	(P-8842)	(P-8842)	(P-8842)	(P-8842)	(F-8842)	(F-8842) (P-8842)	(P-8842)
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Tune 12 1992		1		S REGISTER		- 1
	Volume 16,		Issue #24 SECTIONS A	SECTIONS AFFECTED INDEX	_	June 12, 1992
(P-8842)	TITLE 62 (CONT'D)	(T,D)		240.1430	-	(P-14365/91; P-14679/91;
(P-8842)	200.402	am	(P-3267)			A-2576)
(P-8842)	200.500	am	(P-3267)	240.1430	am	(P-3282)
(F-8842)	200.600	am	(P-3267)	240.1440	-	(P-14365/91; P-14679/91;
(F-8842)	200.603	аш	(P-3267)			A-2576)
(F-8842)	200.604	am	(P-3267)	240.1440	a	(P-14365/91; P-14679/91;
(I -004Z)	200.806	am	(P-3267)			A-2576)
(F-8642)	200.Ap.B	п	(P-3267)	240.1450	L	(P-14365/91; P-14679/91;
$(F^{-1}; A-9006) (E-211)$	220.190	am	(P-3316)			A-2576)
(F-1; A-9006) (E-211)	240.10	am	(P-3282)	240.1450	am	(P-14365/91; P-14679/91;
(F-/; A-9000) (E-211)	240.500	п	(P-3282)			A-2576) (P-3282)
(F-/; A-9006) (E-211)	240.510	L	(P-3282)	240.1460	-	(P-14365/91; P-14679/91;
(P-7; A-9006) (E-211)	240.510	=	(P-3282)			A-2576)
(P-7; A-9006) (E-211)	240.520	4	(P-3282)	240.1460	ma	(P-14365/91; P-14679/91;
(P-7; A-9006) (E-211)	240.520	п	(P-3282)			A-2576) (P-3282)
(P-7; A-9006) (E-211)	240.530		(P-3282)	240.1470	-	(P-14365/91; P-14679/91;
(P-7; A-9006) (E-211)	240.530	п	(P-3282)			A-2576)
(P-7; A-9006) (E-211)	240.540	п	(P-3282)	240.1500	-	(P-14365/91; P-14679/91;
(P-7; A-9006) (E-211)	240.550	п	(P-3282)			A-2576)
(P-7; A-9006) (E-211)	240.610	am	(P-3282)	240.1500	_	(P-14365/91: P-14679/91:
(P-7; A-9006) (E-211)	240.630	am	(P-3282)			A-2576)
(P-7; A-9006) (E-211)	240.640	am	(P-3282)	240.1510	-	(P-14365/91: P-14679/91:
(P-7; A-9006) (E-211)	240.710	am	(P-3282)			A-2576)
(P-7; A-9006) (E-211)	240 760	E E	(P-3282)	240.1520	-	(P-14365/91· P-14679/91·
(P-7; A-9006) (E-211)	240.780	1	(P-3282)		:	A-2576)
(P-7; A-9006) (E-211)	240 995		(1 2222) (P-14365/91: P-14679/91:	240 1530	-	(P-14365/91: P-14679/91:
(P-7; A-9006) (E-211)	670:017		A-2576)	2001.044	=	A-2576)
(P-7; A-9006) (E-211)	240 1110	me	(P-1782)	2501 37	5	(P-2719: A-8345)
(P-7; A-9006) (E-211)	240 1130		(D-3787)		1	(F-2807)
(P-7; A-9006) (E-211)	240.1150	E	(P-3282)			(1697-7)
(P-7; A-9006) (E-211)	240.1160	١.	(P-3282)	TITTE 68		
(P-7; A-9006) (E-211)	240 1160		(P-1282)	580 10	=	(P-8671)
(P-7; A-9006) (E-211)	240 1170	1 E	(P-3282)	580.20	: =	(P-8671)
(P-7; A-9006) (E-211)	240 1180		(P-3282)	580 30	: c	(P-8671)
(P-7; A-9006) (E-211)	240 1400	٠.	(1 -5252) (P-14365/01: P-14679/01:	580.50	: c	(P-8671)
(P-7; A-9006) (E-211)	0041.047	•	A-2576)	580.50	: 6	(P-8671)
(P-7; A-9006) (E-211)			6,5	870 100	: =	(P-12094/91: A-3096)
(P-7; A-9006) (E-211)	240 1400		(P-14365/91: P-14679/91:	870 105	: :	(P-12094/91: A-3096)
(P-7; A-9006) (E-211)	004104	1	A-2576)	870 110	: =	(P-12094/91: A-3096)
(P-7; A-9006) (E-211)	240 1405		(P-14365/01: P-14670/01:	870 115	: :	(P-12004/01: A-3006)
(P-7; A-9006) (E-211)	2041.047	•	A-2576)	870.120	: :	(P-12094/91; A-3006)
(P-7; A-9006) (E-211)	240 1410		(P-1279)	870 200	: =	(P-12094/91, A-3096)
(P-7; A-9006) (E-211)		•	A-2576)	870.210		(P-12094/91: A-3096)
(P-7; A-9006) (E-211)	240.1410	=	(P-14365/91:P-14679/91:	870.215		(P-12094/91: A-3096)
(P-7; A-9006) (E-211)			A-2576)	870.220	-	(P-12094/91; A-3096)
(P-7; A-9006) (E-211)	240.1420	4	(P-14365/91; P-14679/91;	870.225	u	(P-12094/91; A-3096)
(E-2648)			A-2576)	870.230	-	(P-12094/91; A-3096)
	240.1420	u	(P-14365/91; P-14679/91;	870.235	=	(P-12094/91; A-3096)
(B 2262)			A-2576)	870.240	п	(P-12094/91; A-3096)
(P-3267) (P-3767)			•	870.245	c	(P-12094/91; A-3096)
(1-3261)			,	870.300	c	(P-12094/91; A-3096)

June 12, 1992	(P-4280/91; A-594)	(P-4280/91; A-594)	(P-4791)	(P-4309/91; A-623)	(P-4309/91; A-623)	(P-8066)	(P-8066)	(P-8066)	(P-8066)	(P-8066)	(P-8103)	(P-8103)	(P-8103)	(P-14389/91; A-4052)	(P-14389/91; A-4052)	(P-14389/91; A-4052)	(P-16874/91; RC-4556;	A-5921)	(P-16874/91; A-5921)	(P-16874/91; RC-4556;	A-5921)	(P-16874/91; RC-4556;	A-5921)	(P-168/4/91; A-5921)	(P-16874/91; A-5921)	(P-6972/91; A-5916)	(P-5836)	(F-5836)	(P-5836)	(P-5836)	(P-5836)	(P-5836)	(P-5836)	(P-5836)	(P-5836)																
	EE	аш	am	me.	am	am	am	аш	am	am	am	am	am	am	am	L	am	am	me.	me	am	a	п	а	am		am	am		E E		п	Bm	am.	am	am	am	am	am	¤	a	¤	а	a	¤	a	п	п	п	a	a
ILLINOIS REGISTER SECTIONS AFFECTED INDEX	350.120	350.330	350.3730	390.120	390.330	395.100	395.110	395.120	395.130	395.140	395.150	395.160	395.170	395.180	395.190	395.200	395.300	395.400	630.20	630.90	630.200	692.10	692.Ap.A	692.Ap.B	693.10		693.15	693.30	;	693.40	**	693.45	693.100	694.220	720.5	750.10	/50.100	/50.110	750.1000	750.2000	750.2010	750.2020	750.2030	750.2031	750.2032	750.2040	750.2041	750.2042	750.2050	750.2060	750.2070
#24		(P-3689)	(P-3689)	(P-3689)	(P-1511)	(P-1511)	(1511)	(P-2310; A-8178)	(P-2310; A-8178)	(P-2310; A-8178)	(P-2310; A-8178)	(A-8178)	(A-8178)			(P-15035/91; A-203)	(P-15035/91; A-203)	(P-15035/91; A-203)			(P-3426)	(P-2016)	(P-2034)	(P-4367/91; A-681)	(P-2034)	(F-2034)	(F-436//91; A-681)	(F-2034)	(P-4367/91; A-681)	(P-2034)	(P-2034)	(P-2034)	(P-2034)	(P-2034)	(P-14039/91; A-5977)	(P-2034)	(P-2034)	(P-2034)	(P-2034)	(P-2034)	(P-4338/91; A-651)	(P-4338/91; A-651)									
Issue	(LD	п	u	u	ET.	Em	am a	am.	am	am	am	am	am.	am	am	am	п	п	п	п	u	п			am	am	п			am m	Ø	am	am m	am	am	am		am	am	BID	BID	am	аш	am	am	am	ATD	am	L	am	am me
Volume 16,	TITLE 71 (CONT'D)	110.50	110.60	110.70	2000.45	2000.100	2000.210	2000.245	2000.250	2000.320	2000.340	2000.410	2000.430	2000.500	2000.520	2000.540	2300.10	2300.30	2300.50	2300.70	2300.80	2300.90		TITLE 74	750.40	750.Ap.B	750.Ap.C		TILE 77	205.620	250.2720	300.110	300.120	300.140	300.150	300.330		300.620	300.630	300.1010	300.1220	300.1240	300.2070	300.2420	300.3060	300,3100	300.3310	300.3710	300.Ap.B	330.120	330.330
June 12, 1992		(P-3784)	(P-3784)	(P-3784)	(P-3784)	(P-3784)	(P-3784)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-5746)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-11369/91; A-3175)	(P-8318)	(P-8318)	(P-8318)	(P-8318)	(P-14375/91; A-3204)	(P-18348/91; A-7009)			(P-3689)	(P-3689)	(P-3689)	(P-3689)						
	T'D	E C	am	am.	am	EE	am	am	am	am	am	B.T.	am	am	п	am	am	am	am	am	am	am	аш	m a	am	am	am	am	am	п	am	am	am	am	me.	am	am	п	am	am	am	am	am	a	п			п	п	п	п
ILLINOIS REGISTER SECTIONS AFFECTED INDEX	TITLE 68 (CONT'D)	1310.60	1310.70	1310.75	1310.80	1310.85	1310.90	1330.10	1330.20	1330.30	1330.40	1330.50	1330.55	1330.70	1330.75	1330.80	1330.90	1330.91	1330.92	1330.93	1330.94	1330.95	1330.96	1330.99	1330.100	1330.110	1330.120	1330.130	1330.140	1340.15	1340.20	1340.30	1340.40	1340.50	1340.55	1340.60	1340.65	1340.66	1340.70	1360.30	1360.45	1360.60	1360.70	1450.175	1470.95		TITLE 71	110.10	110.20	110.30	110.40
Issue #24 SECTIONS AF		(P-12094/91; A-3096)	(P-2010)	(P-2010)	(P-2010)	(P-2010)	(P-2010)	(P-2010)	(P-2010)	Ī	Ŭ	Ī	_	(P-2492/91;		_	_	_	_	_	_		_	_	(P-17030/91; A-3194)		(P-5741)	_			n (P-3784)																				
	(D'TN)	п	п	п	п	п	п	¤	п	п	п	п	п	п	П	п	п	п	п	п	а	H	am	am	a TT	E E	am	THE THE	am	T B	E	E E	E	E	am	H	_	¤	•	п	a	a	п	¤	п	am	E	¤	am	аш	E E
Volume 16,	TITLE 68 (CONT'D	870.305	870.310	870.315	870.320	870.325	870.400	870.405	870.500	870.505	870.510	870.515	870.520	870.525	1130.10	1130.20	1130.30	1130.40	1130.50	1130.60	1130.70	1150.20	1150.30	1150.40	1150.50	1150.60	1150.65	1150.70	1150.80	1150.90	1150.100	1150.110	1150.II.A	1150.80	1175.565	1200.30	1255.10	1255.20	1255.30	1255.40	1255.50	1255.60	1255.70	1255.80	1255.90	1275.40	1275.50	1275.80	1310.20	1310.30	1310.40

June 12, 1992		2) (E-4899)	(P-4/82) (E-4899)	2) (E-4899) 2) (F-4899)	2) (E-4899)	(F4/82) (E4899)	2) (E-4899)		(F-4782) (E-4899)	(2) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-15943/91; A-5941;	િ	(P-4782) (E-4899)	(P-4782) (E-4899) (P-8320) (E-8571)	(F-6273) (E-6371) (P-4782) (F-4899)	(F-4782) (E-4899)	(P-4782) (E-4899)	P-4782) (E-4899)	(P-15943/91; A-5941;	(2)	(P-4782) (E-4899)	(F-4/62) (E-4899) (B-4782) (E-4899)	2) (E-8571)	(2) (E-4899)		(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(F-4782) (E-4899) (P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4/82) (E-4899) (P-4782) (E-4899)	(F-4782) (E-4857) (P-8329) (E-8571)	(2) (E-4899)	(2) (E-4899)		(2) (E-4899)	(2) (E-4899)	P-4782) (F-4809)	(1)	2) (E-4899)
Jur		(P-4782)	(F4/8	(F4/62)	(54/87)	(70/4-7)	(DA782)	(P-4782)	(P-478	(P-4782)	(P-478	(P-478	(P-159	C-7512)	(P-478	(F4/8	(P-478)	P-478	(P-478	(P-478	(P-159	C-7512)	(P-478	9 4 6	(F-4/82) (P-8329)	(P-4782)	(P-478	(P-478	(P-478	(P-478	(P-478	04479 0478	(P-478	(P-478	(P478	(F4/8	(F-478)	(P-4782)	(P-4782)	(P-832	(P-4782)	(P-4782)	9778	2	(P-4782)
×		a	E I	a :				E .	a	q	am	am			аш	Ę	Ē	H	am	am			E I		E	ma	B	am	am	am	am !		в	ma	am			am	am		me		am		a i
ILLINOIS REGISTER SECTIONS AFFECTED INDEX		790.3480	790.3492	700 3540	700 3520	700 3700	790,3742	790.3780	790.3860	790.3875	790.3907	790.3910			790.3940	/90.3945	790, 3980	790.3996	790.4012	790.4040			790.4060	700.4100	790.4140	790.4173	790.4180	790.4220	790.4260	790.4300	790,4385	790.4396	790.4398	790.4420	790.4580	790.4620	0004:06	790.4670	790.4680		790.4700	790.4720	790.4740		790.4780
ISSUE #24 SECTIONS P		(000) (E 1800)	(F-4/82) (E-4899)	(F4/82) (E4899)	(F4/82) (E4899)	(F-4782) (E-4899)	(P.4782) (F.4899)	(P-15943/91: A-5941:	C-7512)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	Ş.	C-7512) (P-	(E-4899)	(P-13943/91; A-3941; C-7512)	(P-4782) (F-4899)	(P-15943/91; A-5941;	C-7512) (P-4782)	(E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(F4/82) (E4899)	(F-4/62) (E-4699) (P-15943/91: A-5941:	C-7512) (P-8329)	(E-8571)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(F4/82) (E4899) (P4782) (E4899)	(P-15943/91; A-5941)	(P-4782) (E-4899)	(P-4782) (E-4899)	(F-4/82) (E-4899) (P-4782) (E-4899)	(F 4/82) (E 4899) (P 4782) (E 4899)	(P-4782) (E-4899)	(P-4782) (E-4899			(P-4782) (E-4899)	(P-4782) (E-4899)	((P-4782) (E-4899)
Issu	í			1			E 8			аш	am	аш	am		ļ	EE S	E	Ha			ВШ	BIII	H E		H H			am	вш	am	am :		аш	am	T B		E CE	E C	am	am	аш	am	am	i	H H
Volume 16,		TITLE 77 (CONT'D)	700.2133	700.2180	700 2380	790.2380	790 2470	790.2485		790.2500	790.2510	790.2540	790.2580		2000	/90.2603	790,2605	790.2613			790.2617	790.2618	790.2620	790.2661	790.2805			790.2900	790.2902	790.2904	790.2980	790.3020	790.3027	790.3029	790.3049	790.3034	790.3100	790,3260	790,3300	790.3308	790.3315	790.3335	790.3340		790.3420
June 12, 1992		(P-15943/91; A-5941;	C-/512) (P-4/82)	(E-4099) (F-6329)	(E-63/1)	(F4782) (E4893)	(P4782) (F4899)	(P-4782) (E-4899)	(P-4782) (E-4890)	(P-15943/91; A-5941;	C-7512)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (e-4899)	(F4/82) (E-4899) (P4782) (E-4899)	(F-4782) (E-4899)	(P-15943/91; A-5941;	C-7512) (P-4782)	(E-4899)	(P-4782) (E-4899)	(P-15943/91; A-5941;	C-7512) (P-8329)	(E-6371) (B-4787) (E-4800)	(F4/82) (E4899) (P4782) (E4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-8329) (E-8571)	(F4782) (E4899) (P4782) (E4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(F4/82) (E4899) (P4782) (E4899)	(F-8329) (E-8571)	(P-4782) (E-4899)	(P-15943/91; A-5941;	C-7512) (P-4782)	(E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)		(P-8329) (E-8571)
×		аш						me	am	am		аш	аш	аш	вш	E :		E			c			E		ВШ	аш	am	am	аш	į	an an	аш	am	am			am	am			am	am		вш
ILLINOIS REGISTER TIONS AFFECTED INDE		790.799			000 000	700 830	790.860	790.900	790.910	790.920		790.980	790.1060	790.1112	790.1120	790.1140	790.1345	790,1350			790.1388			700 1420	790.1460	790.1490	790.1500	790.1540	790.1560	790.1570	700 1660	790.1685	790.1700	790.1710	790.1740	790.1820	790,1835	790.1860	790.1950			790.1980	790.2020		790.2060
ILLINOIS REGISTER SECTIONS AFFECTED INDEX																												(P-15943/91; A-5941;		E-4899)	3.4899)	3,4899)	3-4899)	(P-15943/91; A-5941;	4782)	r-63 <i>2</i> 9)	3-4899)	3-4899)	3-4899)	3-4899)	3-4899)	3-4899)	3-8571)		3-4899)
#24		()203	(P-5830)	(F-3630)	(F-3630)	(D-5861)	(1-5861)	(P-5861)	(P-5861)	P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(P-5861)	(F-3001)	(F-5885)	(P-5885)	(P-5885)	P-15943/9	C-7512)	(P-4782) (E-4899)	(P-4782) (E-4899) (P-4782) (E-4899)	(F4782) (E4899) (P4782) (E4899)	(P-4782) (E-4899)	P-15943/9	C-7512) (P-4782)	(E-4699) (F-6329) (E-8571)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-4782) (E-4899)	(P-8329) (E-8571)		(P-4782) (E-4899)
Issue #24	į			=					_	Ī		u u	о п	_		9 9			u u	o u		_	п 1		- L			am (_	_			_	am (٠ ،		am	_	вш (am (_	am m	_		ma .
Volume 16, I		TITLE 77 (CONT'D)	750 3000	750.3000	750.3100	750.3200	760.20	760.100	760.110	760.900	760.2000	760.2010	760.2020	760.2030	760.2031	760.2032	760.2041	760.2042	760.2050	760.2060	760.2070	760.2080	760.3000	760.3100	770.10	770.20	770.30	790.40		790.480	790.500	790.548	790.580	790.600			790.620	099'062	790.700	790.706	790.721	790.740		: 1	790.760

	ILLINOIS REGISTER			ILLINOIS REGISTER	
Volume 16, Issue #24	SECTIONS AFFECTED INDEX	June 12, 1992	Volume 16, Issue #24	4 SECTIONS AFFECTED INDEX	June 12,
TITLE 77 (CONT'D)	ma 000.6300	am (P-4782) (E-4899)	TITLE 77 (CONT'D)	790 9180 sm (P-4782) (F-486	(P.4782) (F.48

(P4782) (E4899) (P4782) (E4899)	۰	
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	June 12, 1992	n (P-9083/91; A-2457)	n (P-9083/91; A-2457)	n (P-9083/91; A-2457)	r (P-9153/91; A-2530)	n (P-9083/91; A-2457)	r (P-9153/91; A-2530)	n (P-9083/91; A-2457)		r (P-9153/91; A-2530)	n (P-9083/91; A-2457)	n (P-9083/91; A-2457)	n (P-9083/91; A-2457)	n (P-9083/91; A-2457)	r (P-9153/91; A-2530)	n (P-9083/91; A-2457)		r (P-9153/91; A-2530)	n (P-9083/91; A-2457)		n (P-9083/91; A-2457)		n (P-9083/91; A-2457)	r (P-9153/91; A-2530)	n (P-9083/91; A-2457)	r (P-9153/91; A-2530)		r (P-9153/91; A-2530)	n (P-9083/91: A-2457)		r (P-9153/91; A-2530)	n (P-9083/91; A-2457)	r (P-9153/91; A-2530)		r (P-9153/91; A-2530)	r (P-9153/91; A-2530)	r (P-9153/91; A-2530)	r (F-9149/91; A-2455)	r (F-9218/91; A-2533)	r (F-9218/91; A-2333)	r (F-9218/91; A-2333)	(F-9216/91; A-2333)	(F-9216/91; A-2333)	(F-9218/91, A-2333)	(F-9218/91; A-2333)	r (F-9218/91; A-2533)	r (F-9218/91; A-2533)	(F-9216/91; A-2333)	(F-74.10/71, A-6333)
ILLINOIS REGISTER	SECTIONS AFFECTED INDEX	2030.1060	2030,1080	2030.1090	2030.1110	2030.1110	2030.1120	2030.1120	2030.1130	2030:1140	2030.1140	2030.1150	2030.1160	2030.1205	2030.1210	2030.1210	2030.1215	2030.1220	2030.1220	2030.1225	2030.1225	2030.1230	2030.1230	2030.1240	2030.1243	2030.1230	2030.1230	2030,1250	2030.1265	2030.1270	2030.1310	2030.1310	2030.1320	2030.1320	2030.1330	2030.1340	2030.1350	2031.10	2032.10	2032.13	2032.20	2032.23	2032.30	2032:33	2032.40	2032.43	2032.50	2032.33	702-707
	#24	(P-0153/01: A-2530)	(P-9083/91; A-2457)	(P-9153/91; A-2530)		(P-9083/91; A-2457)		(P-9083/91; A-2457)		(P-9153/91; A-2530)			(P-9153/91; A-2530)	(P-9153/91; A-2530)										(F-9153/91; A-2530)		(P-9133/91; A-2330)				(P-9083/91; A-2457)	(P-9083/91; A-2457)	(P-9153/91; A-2530)	(P-9083/91; A-2457)		(P-9153/91; A-2530)	(P-9153/91; A-2530)	(P-9153/91; A-2530)		(F-9153/91; A-2530)	(F-9153/91; A-2530)	(F-9153/91; A-2530)		(F-9153/91; A-2530)	(F-2083/91, A-2437)	(F-9153/91; A-2530)	(F-9083/91; A-2457)	(P-9153/91; A-2530)	(F-9063/91; A-2437)	(F-9083/91; A-2437)
	Volume 16, Issue	7030 \$10	2030.510 n	2030.520 r	2030.520 n	2030.530 n	2030.540 n	2030.550 n	2030:010 n	2030.620 r	2030.620 n	2030.630 r	2030.640 r	2030.710 r	2030.710 n	2030.720 r	2030.720 n	2030.730 r	2030.730 n	2030.740 r	2030.740 n	2030.750 r	2030.750 n	2030.760 F	2030.760 n	2030.810 F	2030:810	2030.820 n	2030.830 n	2030.840 n	2030.850 n	2030.910 r	2030.910 n	2030.920 r	2030.930 r	2030.940 r	2030.950 r	2030,960 r	2030.970 r	2030.980 r	2030, 1010 r	2030.1010	2030.1020	2030.1020	2030.1030 r	2030.1030 n	2030.1040 r	2030.1040 n	n 0507.1050
	June 12, 1992	(P-5225) (P-5225)	(P-9083/91; A-2457)		(P-9083/91; A-2457)	(P-9153/91; A-2530)	(F-9083/91; A-2437)		(P-9153/91; A-2530)		(P-9083/91; A-2457)		(P-9083/91; A-2457)	(P-9153/91; A-2530)		(P-9083/91; A-2457)	(P-9153/91; A-2530)		(P-9153/91; A-2530)	(P-9083/91; A-2457)		(P-9083/91; A-2457)	(F-9083/91; A-2437)	(F-9133/91, A-2330)		(P-9083/91; A-2357)	(P-9153/91: A-2530)		(P-9153/91; A-2530)		(P-9153/91; A-2530)	(P-9083/91; A-2457)		(P-9083/91; A-2457)	(F-9153/91; A-2530)	(F-9083/91; A-2437)		(D-0083/01: A-2457)	(F-9083/91, A-2437) (P-0153/01: A-2530)			(D-0083/01: A-2457)	(P-9153/91: A-2530)	(P-9083/91: A-2457)	(P-0153/01: A-2530)	(P-9133/91, A-2330)	(P-9153/91; A-2437)	(P-9083/91: A-2457)	((
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ILLINOIS REGISTER	SECTIONS AFFECTED INDEX	1240.70 1240.Ap.A	2030.10	2030.10	2030.20	2030.20	2030.30	2030.30	2030.40	2030.50	2030.100	2030.105	2030.107	2030.110	2030.110	2030.115	2030.120	2030.120	2030.130	2030.130	2030.140	2030.150	2030.160	2030.210	2030.210	2030.220	2030,230	2030.230	2030.310	2030.310	2030.320	2030.320	2030.330	2030.330	2030.340	2030.340	2030.330	2020.350	2030.300	2030.410	2030.410	024.0002	2030.420	2030:430	2020.420	2030.440	2030.440	2030.450	
ILLINOI	SECTIONS AF			3																					•																					,			
	Issue #24	E	1	(P-8128)	(P-8128)	(P-5205)	(P-5205)	(P-5205)	(P-5205)	(P-5205)	(P-5205)	(P-5205)	(P-4755)	(P-4755)	(P-4755)	(P-4755)	(P-4755)	(P-4755)	(P-4755)	(P-4755)	(P-4755)	(P-4755)	(P-4755)	(F4/33)	(F-4/35)	(F-4/33) (P-3063)	(P-5187)	(P-5187)	(P-5187)	(P-5187)	(P-5187)	(P-5187)	(P-5187)	(P-5187)	(P-5187)	(P-5187)	(F-5187)	(F-5167)	(F-5187)	(F-5167)	(F-5187)	(F-5107)	(F-5187)	(B-5225)	(F-5222)	(F-5225)	(P-5223)	(F-5223)	(~ 10 m
ı		(T.D)		am	am	a	a	= =	= =		п	п	am	am	am	am	am	am	am	аш	am	am	BIB	an i					-	-	-	-		-	-	L	.	L	-	.	.	- 1	٠,	٠.	-	٠, ١	-
	Volume 16,	TITLE 77 (CONT'D)	(P-4329)	905.15	905.100	1120.10	1120.20	1120.110	1120.120	1120.210	1120.310	1120.Ap.A	1130.140	1130.220	1130.410	1130.510	1130.620	1130.630	1130.640	1130.710	1130.720	1130.730	1130.740	1130.760	1130.770	1150.780	1230.10	1230.20	1230.30	1230.110	1230.120	1230.210	1230.220	1230.230	1230.240	1230.250	1230.260	1230.310	1230.320	1230.410	1230.420	1230.15.A	1230.10.5	1240.10	1240.20	1240.30	1240.40	1240.30	1240.60

June 12, 1992	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-14340/91: A-6177)	(P-16535/91· A-6177)	(P-7572)	(P-3242)	(F-3242)	(F-5242)	(F-3242)		;	(P-7306)	(P-7306)	(P-14196/91; A-2624)	(P-15013/91; A-1642)	(P-15948/91; A-4859)	(P-15948/91: A-4859)	(P-15948/91: A-4859)	(P-15948/91· A-4859)	(P-15058/01: A-4867)	(D.15058/01: A.4867)	(F-13536/91, A-4607)	(F-13536/91, A-4607)	(P-15958/91; A-4867)	(P.18506/01: A.7601)	(F-16500/91; A-7091)	(P-18506/91; A-7691)	(P-18505/01: A-7601)	(P-18506/01: A-7601)	(F-16306/91; A-7691)	(P-6/62)	(F-6/62)	(F-6/62)	(P-6///)	(F-6/77)	(P-6777)	(P-15417/91; A-4876)	(P-15417/91; A-4876)	(P-15422/91; A-3578)	(P-16913/91; A-5988)										
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ILLINOIS REGISTER SECTIONS AFFECTED INDEX	757.300	757.Ex.A	757.Ex.B	757.Ex.C	757.Ex.D	757.Ex.E	760.20			770 10	07.077	07.07.7	06.077		111E 20	100.3700	100.9920	110.190	130.310	180.101	180.130	180.140	180 145	190 101	190:101	190 120	190.120	190.175	205 101	205.101	295.103	202.115	205 120	430.110	430.110	430.125	430.160	435.120	435.140	435.160	460.101	460.110	480.101	490.10	490.20	490.30	490.40	490.50	490.60	490.70	490.80	490.90	490.100	
Issue #24 SECTIONS		(P-342; A-8382)	(PP-5068; RC-6899)	(PP-5068; RC-6899)	(P-342; A-8382)	(P-342; A-8382)	(P-342; A-8382)	(P-342: A-8382)	(P-12051/91: A-3450)	(P-5554) (R-6052)	(P-7325)	(B-7375)	(F-1323)	(F-7323)	(F-/323)	(P-3235)	(P-3235)	(P-7079)	(P-15199/91; A-4831)			(P-18018/91:A-7654)	(P-18018/91: A-7654)	(P-1936: W-7737)	(P-8769)	(P-16538/91: A-6180)	(F-10330/71, A-1130)	(P-6533)	(F-2555) (P-11025/91: A-2535)	(P-11025/91: A-2535)	(P-1102/91, A-2535)	(P-11905/91: A-2550)	(* 11705/11, 11 200) (P-6538)	(F-0338)	(F-0342)	(F-0342)	(F-6342)	(P-6542)	(F-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	(P-6542)	
Issu	I'D	am	am	am	BE	am	arn	am	am	-	1 6			∄	Ħ	am	am	arm	а			1				1 8		, me	1			١.		# c	= :		a	¤	a	п	а	u	u	u	п	п	u	п	п	п	п	۱ -	1 9	
Volume 16,	TITLE 80 (CONT'D)	To.S	Tb.T	.Tb.V	.Tb.W	T.Tb.X	Tb.Y	Tb.Z	310.Ap.B	1120.80	1540 80	1540.90	1540.70	1540.100	1340.130	01.002	2650.25	2800.410	2800.650		TITLE 83	110,10	110.30	200.715	275 20	305.20	410 360	440.200	445 40	445.50	445.70	500 335	535 100	757 10	01.757	137.13	001.757	757.105	757.110	757.115	757.120	757.125	757.130	757.200	757.205	757.210	757.215	757.220	757.225	757.230	757.235	757.240	757.245	
June 12, 1992	(P-5104)	(P-5104)	(P-5104)	(P-5104)	(P-17444/91; A-8980)	(P-17444/91; A-8980)	(P-17444/91; A-8980)	(P-17444/91; A-8980)	(P-17444/91: A-8980)			(B 4360)	(F 4360)	(F4390)	(F-430U)	(P-336; A-8375)	(P-8675)	(P-327; A-8368)	(P-327; A-8368)	(P-327; A-8368)	(P-327; A-8368)	(P-327: A-8368)	(P-327: A-8368)	(F-334)	(F-347: A-8387)	(F-711)	(E-711) (P-12051/01: A-3450)	(P-12051/91: A-3450)	(D-347: A-8387)	(P-12051/01: A-3450)	(P-12051/21, A-3450)	(B-6621) (B-6888)	(1 -0.321) (E-0.868)	(E-8239)	(F-342; A-8382)	(E-/11)	(F-342; A-8382)	(PP-5068; RC-6899)	(PP-/056)	(PP-7056)	(P-342; A-8382)	(P-342: A-8382)	(P-342; A-8382)											
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ILLINOIS REGISTER SECTIONS AFFECTED INDEX	2090.40	2090.70	2090.70	2090.100	2510.50	2510.60	2510.70	.Ap.B	Ap.C		TITLE 80	150 410	014:001	150.420	150.430	302.80	302.822	303.102	303.115	303.125	303,175	303.290	303.385	304 51	310 100	21010	310 110	310.110	310.230	310.250	310.280	007:016		310	310.490		310.Ap.A	i	A.dl.	Tb.B	. Tb.C	Tb.D	Tb.E	To.F.	.Tb.G	Tb.H	Tb.I	.Tb.J	Tb.K	O.dT.	T.C.	O.T.	To.R	
SECTION																																																						
# 24		(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(1967 a)	(1967)	(1004-1)	(14301)	(F-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(PAS67)	(PAS67)	(1967)	0.4567)	(PAS67)	(1964)	(F4567)	(F4567)	(1964)	(1964)	(F-4507)	(P-4567)	(P-4367)	(P-4561)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P-4567)	(P4567)	(P-5104)	
Issue	(T'D)	8.73	田	800	am	am	ATT.	8.00	am	8.0		h 4	b		Ħ	E C	:Nc	am am	30:	am	am	E	E 8									1 0		bu i	H H	E E	п	п	B.m	п	and .	lu	п	п	п	п	п	-		1 4	1 =	me	am	
Volume 16,	TITLE 77 (CONT'D)	2056.1	2026.5	2056.15	2056.20	2056.25	2056.50	2056,55	2056.60	2056.61	20.000	00.000	20.002	2030.73	2030.210	2056.215	2056.301	2056.301	2056.303	2056.303	2056.305	2056.310	2056 315	205.550	2020,007	2020.322	2020,330	2056.410	2050:410	2030.413	2020,420	2020.300	2020.303	2056.510	2056.525	2026.600	2026.601	2056.603	2026.603	2056.607	2056.610	2056.615	2056.620	2056,625	2056,630	2056,635	2056,640	2056.645	2056.650	2056,655	2056.660	2050.000	2090.20	

	June 12, 1992	(P-6949/91; A-3552)	(P-4708)	(P-4708)	(P-7775)	(P-4708) (P-8047)	(P-8047)	(P-4708)	(P-65) (E-300)	(P-4708)	(P-4708)	(P-4708)	(P-15933/91; A-6408)	(P-15933/91; A-6408)	(P-7576)	(P-6719)	(P-12171/91; A-4006)	(P-12171/91; A-4006)	(P-121/1/91; A-4006)	(F-121/1/91; A-4000)	(P-13274/91: A-5849)	(P-13274/01: A-6849)	(P-11555/91: A-0849)	(P-772)	(F472)	(F-472)	(F-472)	(P-15933/91: A-6408)	(P-15933/91: A-6408)	(P-472)	(P-3045)	(P-15933/91; A-6408)	(P-5585/91; A-7017)	(P-7482/91; A-3552)	(F-15933/91; A-6408)	(F-1492) (P-4708)	(P-15933/91·	A-6408: RO-9138)	(P-3409)	(P-15933/91: A-6408)	(P-472)	(P-472)	(P-472)	(P-472)	(P-472)	(P-472)	(P-472)	(P-472)	(P-6949/91; A-1877)	(P-7576)
	_	am	am	am	am	am	am	am	am	п	а	п	п	п	аш	am	am	am	an i		E E							am	аш	аш	am	am	am	am :	E :	n a	me		E	E E	-	a	ı a	п	п	а	п	п	am	am
ILLINOIS REGISTER	SECTIONS AFFECTED INDEX	140.11	140.13	140.14	140.15	140.16	140.17	140.19	140.27	140.31	140.32	140.33	140.94	140.95	140.421	140.413	140.440	140.441	140.442	140.449	140.512	140.513	140.514	140.526	140.527	140.528	140.529	140.530	140.538	140.539	140.543	140.552	140.560	140.561	140.302	140 566	140 569		140.579	140.583	140.600	140.602	140,604	140.606	140.608	140.610	140.612	140.614	140.646	140.700
*2.4	#2#		(P-12137/91; A-139)	(P-12137/91; A-139)	(P-12137/91; A-139)	(P-12137/91; A-139)	(P-12137/91; A-139)	(P-12137/91; A-139)	(P-12137/91; A-139)	(P-12137/91; A-139)	(P-1213//91; A-139)	(F-12137/91, A-139)	(P-12137/91: A-139)	(P-12137/91: A-139)	(P-12137/91: A-139)	(F-12137/91, A-139)	(P-12137/91: A-139)	(P-12137/91; A-139)	(F-12137/91; A-139)	(F-1213//91; A-139) (P-12137/91: A-139)	(P-12137/91: A-139)	(P-12137/91: A-139)	(P-12137/91: A-139)	(P-7761)	(P-8898)	(P-8039)	(P-2420)	(E-757) (P-6708)	(P-2420)	(P-2420)	(P-6931)	(P-17171/91; A-174)	(P-6936)	(P-17171/91; A-174)																
Tool	Tesne	L'D)			.		_		_	.	_	L	_	_	_	_	_	_	. .									-	_	L	L	.	.	.			=	m a	me me	ma ma	am	am	am m	E E	am	an an	A C	am		E E
31 0 000 1000	volume 16,	TITLE 89 (CONT'D)	120.208	120.210	120.211	120.212	120.215	120.216	120.217	120.218	120.224	120.225	120.230	120.235	120.236	120.240	120.245	120.250	120.255	120.200	120.021	120.221	120.272	170.271	120.273	120.275	120.276	120.280	120.281	120.282	120.283	120.284	120.285	120.290	120.295	120.319	120 321	120.322	120.323	120.384	121.25	121.34	121.58	121.63	121.72	121.73	130,200	140.2		140.5
June 12, 1992		(P-7793)	(P-2752)	(P-2752)	(P-2752)	(P-7793)	(P-3405; W-5082)	(P-4704)	(P-3335)	(F-3335)	(P-3335)	(P-3335)	(P-3335)	(P-3335)	(F-3335)	(F-14994/91; A-3468) (B-14004/01: A 3468)	(F-14554/51; A-5406) (P-14004/01: A 3469)	(I - 14554/51, A-5408) (P-14904/91: A-3468)	(P-14994/91: A-3468)	(P-14994/91: A-3468)	(P-14994/91; A-3468)	(P-15008/91; A-3512)	(F-15008/91, A-3312)	(F. 15008/91, A-5512)	(P-15008/91; A-3512)	(P-15008/91; A-3512)	(P-15008/91; A-3512)	(P-15008/91; A-3512)	(P-15008/91; A-3512)	(P-15008/91; A-3512)	(P-4216) (E-4540)	(P-4216) (E-4540)	(P-15008/91; A-3512)	(P-15008/91; A-3512)	(P-16623/91; A-5350)	(P-16623/91; A-5350)	(P-8938)	(P-12137/91; A-139)	(P-12137/91; A-139)											
_		a	am	Ш	am	am	am		am	E	am	E E	am	E E	E E				: =	. =	п	п	п	п	п	4 :	am	a	am	u	ВШ	am	E I		1 E	E	am	am			am	am	am	am	am	am	am	am	_	g
ILLINOIS REGISTER		104.248	104.272	104.273	104.274	104.295	110.30		112.70	115.71	112.72	112.74	112.78	112.79	112.82	113.40	113 302	113.400	113.405	113.410	113.415	113.420	113.425	113.430	113.435	113.440	113.440	113.445	114.1	114.2	114.60	114.61	114.62	114 64	114.70	114.80	114.120	114.121	114.122	114.123	114.124	114.128	114.135	114.400	114.420	116.500	116.520	117.10	120.50	120.200
ISSUE #24 SECTIONS AFFECTED INDEX			(P-16913/91; A-5988)	(P-16913/91; A-5988)	(F-16913/91; A-5988)	(P-10913/91; A-5988)	(F-10913/91; A-3988)	(F-10913/91; A-5988)	(F-10913/91; A-5988)	(F-10213/21, A-5968)	(F-10913/91; A-5988)			(F-10932/91; A-3990)					_	(P-3802)	(P-3802)	_	(P-3802)	(P-3802)	_	_	_	_	(P-3802)	(P-3802)	(F-3802)	(F-3802)	(F-3802) (P-3802)	(700 1)		(P-7793)	(P-7793)	(P-7793)	(P-4741)	(P-4741)	(P-2752)	(P-2752)	(P-4741)	(P-2752) (P-4741)	(P-4741)	(P-4741)	(P-4741)	(P-7793)	(P-4741)	(P-4741)
- 1		OLL,D)	L	_	-	. (- 1	٠,		. .	_ :						am	am	am	am	am	аш	am	аш	am	am	am	am	am	am		II w			am	am	am	am	am	am	am	a	am	am	BIII	am	am	am	E
Volume 16,		TITLE 86 (CONT'D	490.110	490.120	490.130	490.140	490.150	490.160	490.170	400 100	490.190	490.200	510.101	510.110	510.120	510.131	510.145	510.160	3000,100	3000.200	3000.210	3000.220	3000,230	3000.245	3000.270	3000.420	3000.425	3000.610	3000.620	3000.625	3000.645	3000,910	3000 1070		TITLE 89	104.10	104.70	104.102	104.202	104.204	104.206	104.208	104.209	104.210	104.212	104.221	104.230	104.235	104.244	104.246

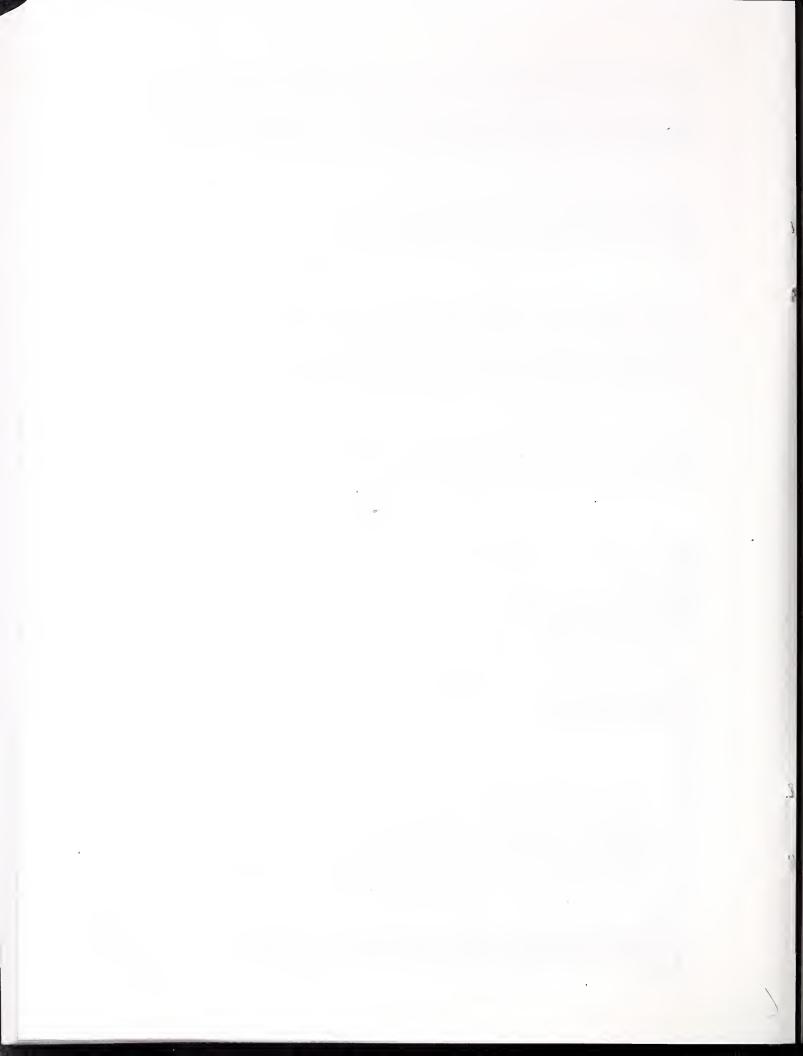
June 12, 1992	n (P-15928/91; A-6255)	_	_	_		(F-13928/91; A-0233)	(F-13926/91; A-0233) (P-15028/91: A-6255)					n (P-15928/91; A-6255)		n (P-15928/91; A-6255)	n (P-15928/91; A-6255)	n (P-15928/91; A-6255)	am (P-15928/91; A-6255)	am (P-15928/91; A-6255)		am (P-15928/91; A-6255)		_		٠,	am (P-15928/91; A-6255)		am (F-13926/91; A-0233)		(P-15928/91;	ат (Р-15931/91; А-6195)	am (P-15931/91; A-6195)	am (P-15931/91; A-6195)	am (P-15931/91; A-6195)		am (P-15931/91; A-6195)		am (F-13931/91, A-0153)	(F-15551/21, A-0155)	(P-15031/01: A-6195)	(F-13931/91, A-0193)	(P-15031/01: A-6195)	(P-15931/91: A-6195)	(P-15931/91: A-6195)	(P-15931/91; A-6195)	(P-15931/91; A-6195)	(E-2258)	(E-2258)	(E-2258)
EX	am	am	am	am	am	- 1		- 4	a ma	am		am	am	am	am	am	ar	81	ar	18.	aı	BI	B	B	8	a	e	इं ल्ब	a	8	8	æ	8	æ	æ	ad i	3 (- '	- 1	- '	- 1					. =	•	=
ILLINOIS REGISTER FIONS AFFECTED INDI	148.20	148.40	148.60	148.70	148.80	148.90	148.100	148.110	148 130	148,140		148.150	148.160	148.170	148.180	148.190	148.200	148.210	148.220	148.230	148.240	148.250	148.260	148.270	148.280	148.290	148.300	148.320	148,400	149.5	149.25	149.50	149.75	149.100	149.105	149.123	149.130	149.173	140 205	149.203	140.250	149.230	149 300	149.305	149.325	150.10	150.20	150.30
ISSUE #24 SECTIONS AFFECTED INDEX	7	(P-12132/91; A-7922)	(F-12132/91; A-7922)	(F-12132/91; A-7922)	(F-12132/91; A-1922) (B-13132/01: A-7022)	(F-12132/91, A-1922) (P-13132/91: A-7922)	(P-12132/21; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-15926/91; A-5898)	(P-7455/91; A-3497)	(P-7455/91; A-3497)	(P-5806)	(P-5806)	(P-5806)	(P-5806)	(P-5806)					(P-15940/91; A-6479)	1 (P-8906)	_	_	•	•	٠,	_ `	•	_	n (F-/301/91; A-4033)		n (F-/301/91; A-4033) /P-15040/01: A-5479)			-					
- 1	NT'D)	ı	L	ы	-	L	L	.	ы 6		- L		-	-	ы		L	-	L	am	q	a	u	a	a	a	= 1	1		am	am	am	am	am	am	am	am	am	am am	am		am		am			am am	a
Volume 16,	TITLE 89 (CONT'D)	141.4080	141.4120	141.4160	141.4200	141.4230	141.4240	141.4280	141.4320	141.4360	141 4480	141.4520	141.4560	141.4600	141.4640	141.4680	141.4720	141.4760	141.4800	144.275	144.300	144.325	144.350	144.375	144.400	144.405	144.425	144.430	147.50	147.75	147.100	147.150	147.300	147.305	147.310	147.315	147.320	147.325	147.340	147.345	147.350	14/.Tb.A	£ 5.	147.Ib.B	G 4T 741	147.10.D	147.Tb.G	147.Tb.L
June 12, 1992	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(F-12132/91; A-1922)	(F-12132/91, A-1922)	(P-12132/91: A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91: A-7922)		(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(F-12132/91; A-1922)	(F-12132/91; A-1922)	(F-12132/91; A-1922) (P-13132/91: A-7922)	(F-12132/91, A-1922)	(F-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(F-12132/91; A-7922)	(D-10132/01: A-7020)	(P-12132/21; A-7022)	(P-12132/91, A-7922)	(D-12132/91: A-7922)	(B-12132/01; A-7022)	(P-12132/91: A-7922)	(P-12132/91: A-7922)	(P-12132/91: A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)
	ч	4	.	٠.					ы	ы	ы	4		ы	L	L	ы	L	_	L	L	_	.	- 1			- -			be	-	_	ы	ы	. .										4	4	L	_
ILLINOIS REGISTER SECTIONS AFFECTED INDEX	141.2040	141.2080	141.2120	141 2200	141.2240	141,2280	141.2320	141.2360	141.2400	141.2440	141.2480	141.2520	141.2560	141.2600	141.2640	141.2680	141.2720	141.2760	141.2800	141.2840	141.2880	141.2920	141.2900	141.3000	141.3040	141 3120	141.3160	141.3200	141.3240	141.3280	141.3320	141.3360	141.3400	141.3440	141.3480	141 3560	141 3600	141 3640	141 3680	141 3720	141 3760	141.3800	141.3840	141.3880	141.3920	141.3960	141.4000	141.4040
ILLINO Issue #24 SECTIONS 1		(P-15933/91; A-6408)	(F-12132/91; A-7922)	(F-12132/91; A-1922)	(P-12132/91, A-7922)	(P-12132/91: A-7922)	(P-12132/91: A-7922)	(P-12132/91: A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(F-12132/91; A-7922)	(F-12132/91; A-1922)	(F-12132/91; A-7922)	(F-12132/91, A-1922)	(F-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(F-12132/91; A-7922)	(B-12132/91, A-1922)	(E-12132/91, A-1922)	(T-12132/91, A-1922)	(P-12132/71, A-1722)	(* 12132/21, A-1922)	(P-12132/21, A-1722)	(P-12132/91: A-7922)	(P-12132/91: A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)	(P-12132/91; A-7922)
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Volume 16,	TITLE 89 (CONT'D	140.835	141.10	141 200	141.240	141.280	141,320	141.360	141.400	141.440	141.480	141.520	141.560	141.600	141.640	141.680	141.720	141.760	141.800	141.840	141.880	141.920	141.960	141.1000	141.1040	141 1130	141,1125	141.1160	141.1200	141.1240	141.1280	141.1320	141.1360	141.1400	141.1480	141.1500	141 1560	141 1600	141 1640	141 1680	141 1720	141.1760	141.1800	141.1840	141.1880	141.1920	141.1960	141.2000

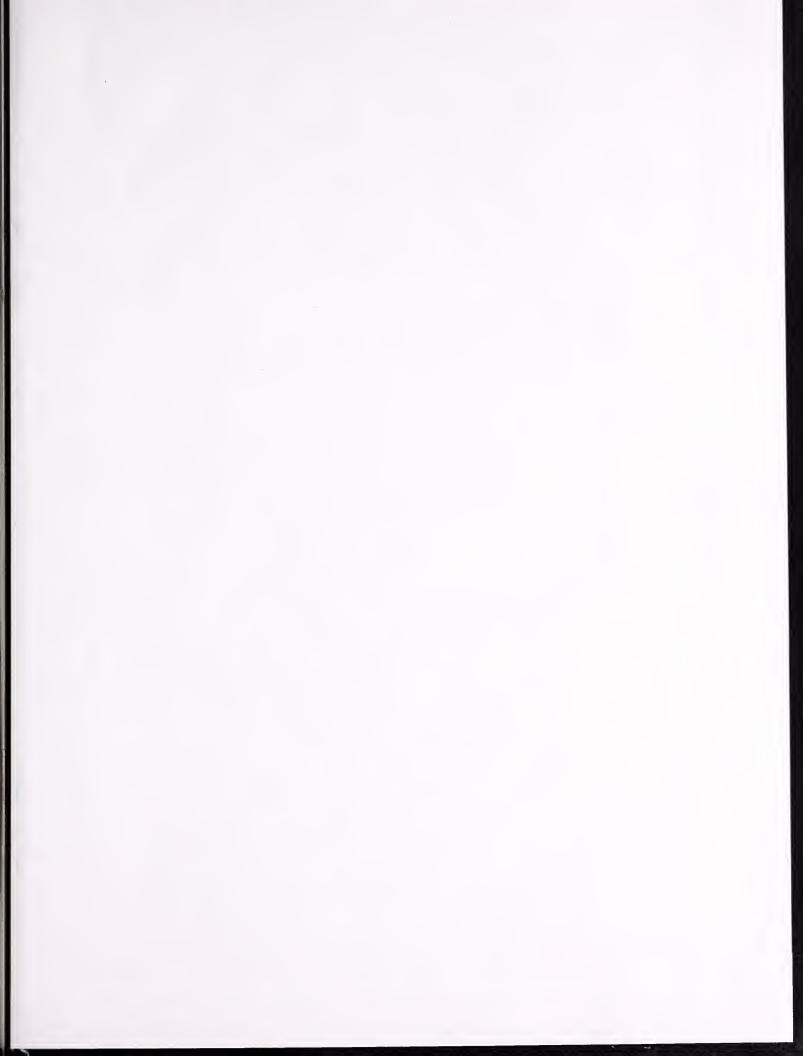
	June 12, 1992	
ILLINOIS REGISTER	Volume 16, Issue #24 SECTIONS AFFECTED INDEX	
	Volume 16, Issue #24	
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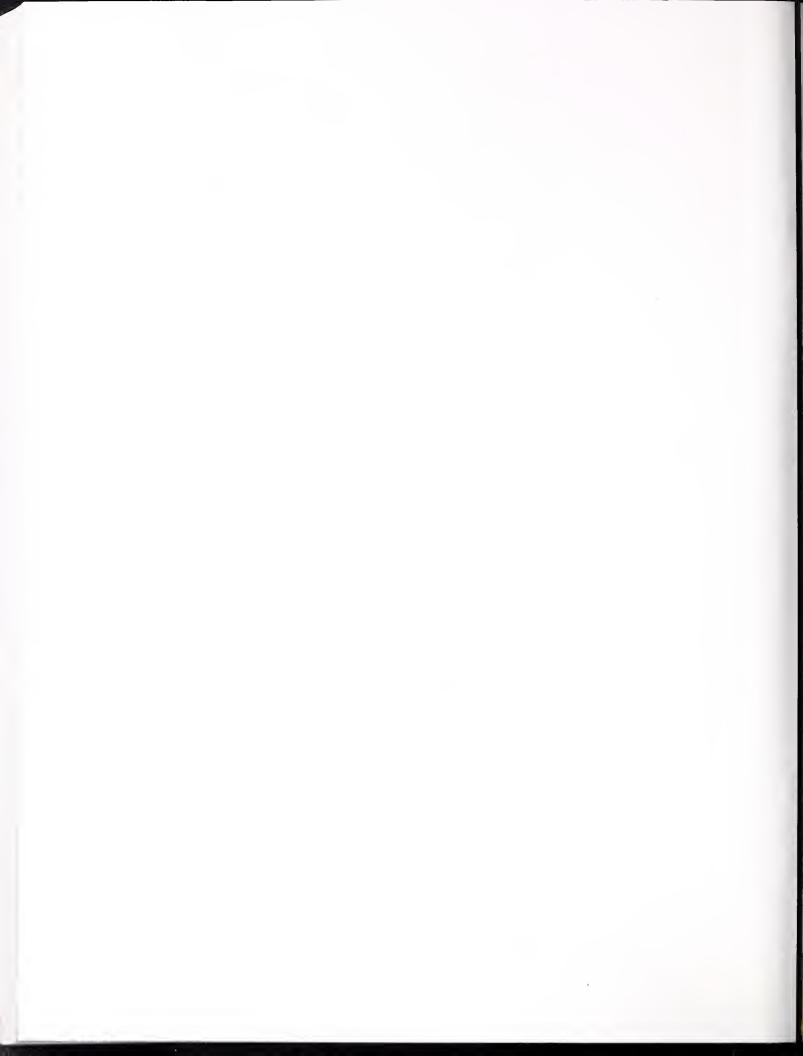
	am (P-7553)	am (P-7553)		(F-/301)	(P-7561)	(P-7561)	(P-7561)	om (F-15088/91· M-2269)			am (P-14734/91; A-7602)	am (P-14734/91; A-7602)	am (P-14734/91: A-7602)			am (P-14734/91; A-7602)	am (P-14734/91; A-7602)	am (P-14734/91; A-7602)	am (P-14734/91; A-7602)	om (P-14734/91: A-7602)			•		am (P-14734/91; A-7602)	am (P-14729/91; A-7597)	am (P-14764/91; A-8950)		am (P-14764/91; A-8950)							_							_	am (P-69; A-8537)	am (P-69; A-8537)	am (P-18110/91; A-8235)	am (P-3440)	(E-2690)	(E-2690)	(E-2690)	(E-2690)	(E-2690)	(E-2688)	am (P-14392/91; A-4529)	
	B	18		-	-	-	_	ā	ì		æ	æ	- R		≅ €	æ	æ	æ	æ	ā	1 6	8 6	4	x	æ	æ	æ	=	æ	i ee	1 0													_				-	-	-	=	-			
	377.2	377.4	270.1	1.076	3/8.2	378.3	378.4	406.2		3	400.4	406.5	406.6	1000	400.	406.8	406.9	406.10	406.11	406 17	406 13	C1.904	400.14	400.77	406.24	407.29	408.5	408.7	408.20	408.30	408 40	408 50	408 60	408 65	408.70	408.105	510.10	510.20	510.30	510.40	510.70	510.80	510,90	510.100	510.110	587.70	597.20	674.10	674.20	674.30	674.40	674.50	683.100	685.500	685.550
		(P-8415/91: A-7633)	(C. 0115/01; 4 7623)	-8413/91; A-7033)	(P-8415/91; A-7633)	(P-8415/91; A-7633)	P-8415/91: A-7633)	(P-8415/01: A-7633)	D 9415/01: A 7433)	-8413/91; A-/033)	P-7963) (P-7963)	P-7963)	P-7963)	(2003)	(F-1903)	(P-7963)	(P-7963)	(P-7963)	P-7963)	D-7063)	(1-1902)	(F-7905)	-/503)	F-/963)	P-7963)	P-7963)	P-7963)	P-7963)	(P-7963)	D-7000)	D 7000)	T 7000)	(F-1999)	D-7000)	D-7999)	D-7000)	P-7999)	D-7000)	p-7999)	D-7999)	(CCC)-1000)	(F.7999)	P-7999)	P-7999)	P-7999)	P-7999)	P-7999)	P-7999)	P-7999)	P-7999)	P-7999)	P-7999)	P-7999)	P-7999)	(P-13229/01: A-3024)
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	TITLE 89 (CONT'D)	325. 355	20.000	335.328	335.330	335,332	115 316	325 325	25.500	333.338	336.10	336.20	336 30	00.000	336.40	336.50	336.60	336.70	336.80	336 00	326.50	330.10	330.110	336.120	336.130	336.140	336.150	336.160	336 170	337 10	01.700	07.755	337.30	337.50	337.60	337.70	337.80	337.00	337 100	337.100	337.120	337.120	337.140	337.150	337.160	337.170	337 180	337,190	337.200	337.210	337.220	337.230	337.240	337.250	357 Am A
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	(P-5403)	(P-5403)	(202)	(F-3403)	(P-5403)	(P-5403)	(P-5403)	(P-5403)	(a 5403)	(r-3403)	(P-5403)	(P-5403)	(P-5403)	(2012)	(r-5405)	(P-7982)	(P-7982)	(P-7982)	(P-7982)	(P-7982)	(P-7082)	(7067)	(F-1902)	(F-/982)	(P-7982)	(P-7982)	(P-7982)	(P-7982)	(P-7982)	(P-7982)	(P-7082)	(P-7082)	(P-7082)	(P-7982)	(P-7982)	(P-7982)	(P-7982)	(P-7982)	(P-7982)	(P-8415/91: A-7633)	(P-8415/91: A-7633)	(P-8415/91: A-7633)	(P-8415/91: A-7633)	(P-8415/91; A	(P-8415/91; A-7633)	(P-8415/91; A-7633)	(P-8415/91: A-7633)	(P-8415/91; A-7633)	(P-8415/91; A-7633)	(P-8415/91; A-7633)	(P-8415/91: A	(P-8415/91; A-7633)	(P-8415/91: A-7633)	(P-8415/91: A-7633)	(P-8415/91: A-7633)
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	305.30	305.40	305 50	305.40	303.60	305.70	305.80	305 90	305 100	303.100	305.110	305.120	305.130	305 140	303.140	309.1	309.2	309.3	309.4	309.5	300.6	2000	7000	8.606	309.9	309.10	309.11	309.12	309.13	309 14	300 15	300 16	300 17	309 18	309.19	309 20	309.21	309.22	309.23	335.100	335 100	335.102	335.200	335.202	335,300	335.302	335,304	335.306	335.308	335,310	335,312	335.314	335,316	335.318	335 320
						7	2	6	î									(066)	.		030)	(200)	ŗ.	_	6	(026)	744;	` _		(030)	744.	(2007)	, (1067)																						,
		(E-2258)	(3)(6)	(9,775)	(8C77-7)	(P-806/91; A-1852)	(P-806/91: A-1852)	(P-806/01: A-1852)	0.7406)	(0047-	(P-8892)	(P-8892)	(P-3605)	3505)	(5005)	(E-2630)	(E-2630)	(P-17007/91; M-2930)	Œ-1739/91; S-1744;	W-2955 M-2943)	(P-17007/91· M-2030)	T 17309/01: C 1744.	19002 36 00 10	W-2935; M-2943)	(E-4069; RC-6898)	(P-17007/91; M-2930)	E-17398/91; S-1744;	W-2955; M-2943)	(F-2901)	P-17007/91· M-2930)	(F-17308/01: S.1744:	W-2055 - M-2043/2001)	(E-2630)	(E-2901)	(E-2901)	(E-2901)	(E-201)	(P-4087)	(P-4087)	P-4087)	P-4087)	P-4087)	P-4087)	(P-4087)	(P-4087)	(P-4087)	(P-4087)	(P-4087)	(P-4087) (C-5083)	(P-4087) (C-5083)	P-4087)	(P-7565)	(P-7545)	P-5403)	(F-5403)
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	TITLE 89 (CONT'D)	150.40	60.60		09.00		160.10				160.77	160.85					240.415	240.430			240 435					240.720				240 725			307.080					_																	
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7 67	16, Issue #24 SECTIONS AFFECTED INDEX		am	a	n (F-2940/91; A-2193) r (P-3003/01· A-2256)	. a	ы	n (P-2940/91;	r (P-3003/91;	n (P-2940/91; A-2193) " (P-2040/01: A-2103)	= =	п	_	2 r (P-3003/91; A-2256) 3 r (P-3003/91: A-2256)	r (P-3003/91;	L	r (P-3003/91;	L	L	F (F-3003/91; A-2256)	r (P-3003/91)	r (P-3003/91;	L	L	L	r (P-3003/91;	5 r (F-3003/91; A-2256)	r (P-3003/91;		n (P-2940/91;	0 r (P-3003/91; A-2256)		.	=	d	n (P-2940/91;	a	r (F-3003/91; A-2236)	- •	- F	1 =	1 #	u	a	n (P-2940/91; A-2193)
7000	June 12, 1992 Volume 16,	TIII ((P-6153) 442.II. A	(F-0139) 442.11.E						(F-6133) 530.40 (P-6134) 530.40				(P-6139) 530.102 (P-6139) 530.103		(P-4813) 530.105	/91; W-2696)		791; W-2696)	(P-3836) 530.109 (P-1826) 530.109 (P-1826)		1/91; W-2697)	(P-3864) 530.112	3/91; W-2698))/91; W-2693)	(F-5647) 530.116 (P-16015/01: W-2699) 520.117		(91; W-2699)		(P-16015/91; W-2699) 530.120	/91: W-2700)					(F-/815) 530.200	(F-7652) (P-16653/91: A-5362) 530 202				1/91; A-1655)			(P-13072/91; A-1685) 530.250
ILLINOIS REGISTER	IONS AFFECTED INDEX			I 06.06	50.100	50.100 n	50.110 r	50.110 n		82) 50.120 n 82) 50.130 r				15) 50.150 r			171.6	171.6	11) 171.1000 am	172 2000		11) 172.2215 am		11) 173.3000 am	,	9) 177.2000 am	9) 179 336 1 1 am	1.1.000.0	9) 178.336.1.5 am		178.2000 am	179.2000 am						391.1000 am		395,2000 am				, 440.11.B n	442.285 am
1	Volume 16, Issue #24 SECT	CONT'D	O Sem	714.30 AE (F-300/)		4	ED R	u	E	787.10 n (P-1302//91; A-2882)	4 4	п	u	845.10 am (P-115/2/91/ A-2615) 845.20 am (P-11572/91/ A-2615)	4	ВШ	am am	ATT.	am am		900 347 am (P-12989/91; A-5311)		900.345 am (P-12989/91; A-5311)	ATD	TI BE	E E	1300.130 am (P-5141/91; A-4819)	1 =	H H		TITLE 92	1		п	L	п	L	50.40 r (P-6153)	- 5	1 -	. 5	1 4	п	ы	50.70 n (P-6153)

TITLE 92 (CONT'D)	(T,D)		121.200	а	(P-561; A-7707)
530.902	ы	(P-3003/91; A-2256)	121.210	a	(P-561; A-7707)
530.903	_	(P-3003/91; A-2256)	121.220	a	(P-561; A-7707)
530.904	_	(P-3003/91; A-2256)	121.230	a	(P-561; A-7707)
530.905	L	(P-3003/91; A-2256)	122.10	a	(P-2113)
530.906	L	(P-3003/91; A-2256)	122.20	п	(P-2113)
530.907	L	(P-3003/91; A-2256)	122.30	a	(P-2113)
530.908		(P-3003/91; A-2256)	122.40	п	(P-2113)
530.909	L	(P-3003/91; A-2256)	122.50	п	(P-2113)
530.II.A	a	(P-2940/91; A-2193)	122.60	a	(P-2113)
708.70	am	(P-8193/91; A-194)	122.70	a	(P-2113)
787.10	п	(P-13027/91; A-2882)			
787.20	п	(P-13027/91; A-2882)			
787.30	п	(P-13027/91; A-2882)			
787.40	a	(P-13027/91; A-2882)			
787.50	a	(P-13027/91; A-2882)			
1002.20	аш	(P-6790)			
1002.45	a	(P-6790)			
1010.420	am	(P-5240)			
1030.11	am	(P-1271)			
1030.30	am	(P-2449)			
1030.84	A.M.	(P-14198/91; A-2182)			
		C-2957)			
1070.20	am	(P-15428/91: A-2172)			
1070.40	me	(P-15428/91: A-2172)			
1309.10	d				
1309.20	=	(P-3238)			
1309.30	d	(P-3238)			
1311.10	=	(P-4195/91: W-2942)			
1440.20	am	(P-5139)			
TITLE 95					
116.40	am	(P-558; A-7704)			
121.20	п	(P-561; A-7707)			
121.30	a	(P-561; A-7707)			
121.40	a	(P-561; A-7707)			
121.50	a	(P-561; A-7707)			
121.60	a	(P-561; A-7707)			
121.70	a	(P-561; A-7707)			
121.80	a	(P-561; A-7707)			
121.90	a	(P-561; A-7707)			
121.100	a	(P-561; A-7707)			
121.110	a	(P-561; A-7707)			
121.120	п	(P-561; A-7707)			
121.130	п	(P-561; A-7707)			
121.140	a	(P-561; A-7707)			
121.150	п	(P-561; A-7707)			
121.160	а	(P-561; A-7707)			
121.170	a	(P-561; A-7707)			
121.180	8	(D-561: A-7707)			
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